

Metropolitan Asylums Board.



REPORTS

FOR THE YEAR

1892

OF THE

STATISTICAL COMMITTEE

AND THE

MEDICAL SUPERINTENDENTS

OF THE

INFECTIOUS HOSPITALS AND IMBECILE ASYLUMS,

ALSO OF THE

AMBULANCE AND TRAINING SHIP "EXMOUTH" COMMITTEES.

(7th Year of Issue.)



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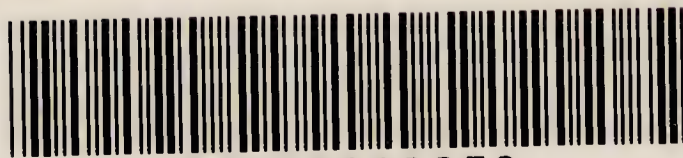
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METROPOLITAN ASYLUMS BOARD.

R E P O R T S

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STATISTICAL COMMITTEE.

1893.

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CHIEF OFFICES—Norfolk House, Norfolk Street, Strand, London, W.C.

Metropolitan Asylums Board.

ANNUAL REPORT OF THE STATISTICAL COMMITTEE FOR THE YEAR 1892.

*The Managers of the
Metropolitan Asylum District.*

1st November, 1893.

SUBJECTS REFERRED TO IN THIS REPORT.

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I.—GENERAL OBSERVATIONS.

(1.) INCREASE OF FEVER AND SMALLPOX ADMISSIONS.—In submitting the Report for the year 1892, the Committee have first to call attention to the unprecedentedly large number of patients suffering from infectious disease who have been treated in the Managers' hospitals in the course of the twelve months.

The total admissions of fever and smallpox patients amounted

to 16,624, and were double the number of any previous year. That number, and 1,847 remaining in hospital at the close of 1891, made a total of 18,471 patients treated during the year.

Of the admissions to the fever hospitals, by far the greater proportion—13,093—were cases of scarlet fever; 2,009 were cases of diphtheria, 430 of enteric fever, 19 of typhus, and 725 of other diseases. The smallpox cases numbered 348, and were more numerous than in any year since the termination of the last epidemic in 1885. Five of these smallpox cases were admitted into the fever hospitals, and are included in the before mentioned 768 cases of other diseases.

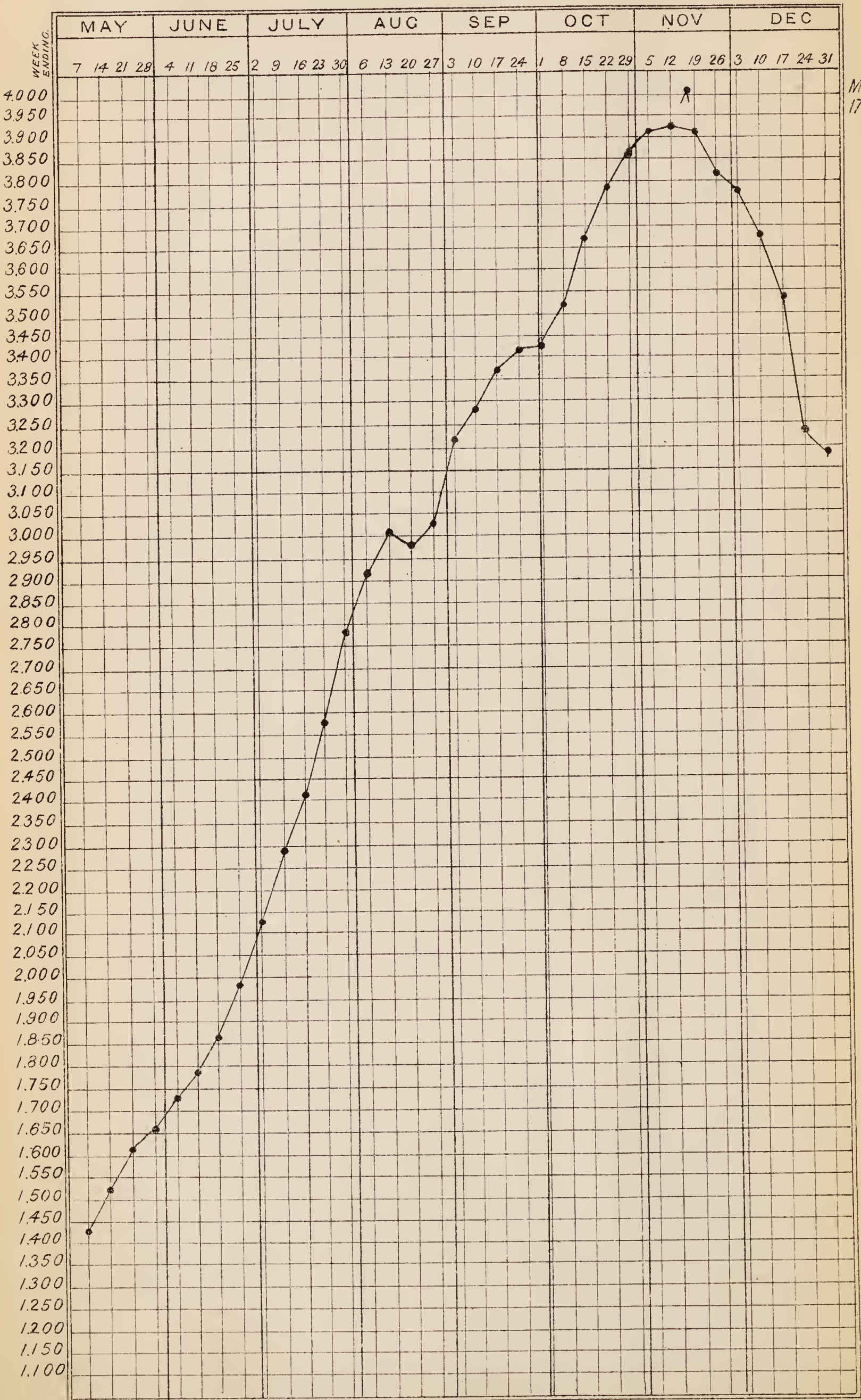
To accommodate the very large increase of fever admissions, the Managers were compelled to place additional beds in many of the hospital wards, to use as wards rooms hitherto in use for other purposes, to open for convalescent scarlet fever patients, the Gore Farm Hospital at Darenth (erected for smallpox convalescents), and to erect temporary buildings in the grounds of several of the hospitals.

It will be remembered that in April, 1891, the Managers applied for, but failed to obtain, the sanction of the Local Government Board to the purchase of a site at Tottenham for the erection of an acute fever hospital. Not succeeding, after much search and inquiry, in finding any more suitable site, the Managers in June, 1892, again made urgent representations to the Local Government Board with regard to the acquisition of this site for the accommodation of the north-eastern districts of the Metropolis; and ultimately the Local Government Board consented to the property being purchased, and used for twelve months. Their consent was given on the 11th August; on the 22nd the Managers entered into possession; and by the 8th October a wooden hut hospital had been erected, and patients received. This hospital is known as the North-Eastern Hospital.

In these various ways the hospital accommodation for scarlet fever cases was increased from 1,662, at which it stood in the early part of May, to 4,095 in November, 1892. The greatest number of scarlet fever patients under treatment at one time was 4,001 on the 17th November.

In the month of May the Managers were in communication with the Local Government Board regarding the number of beds to be placed in the wards of the various hospitals; and a memorandum by Dr. Bridges, Local Government Board Inspector, was forwarded by that Board to the Managers, in which it was suggested that the total accommodation in the Managers' hospitals should be limited to 2,068 beds for all fevers. It was, however, found impossible, owing to the demands made on the hospitals, to limit the number of patients to that suggested.

CHART showing the number of Scarlet fever patients under treatment in the Managers Hospitals at the end of each week from May 7th to end of December, 1892.



Maximum
17th Nov 5

Fever Chart.—The accompanying chart, showing the number of scarlet fever patients remaining under treatment at the end of each week from the 7th May to the 31st December, well illustrates the rapid increases in the numbers of cases for which the Managers were called upon to provide accommodation.

In one week—from 23rd to 30th July—they increased by 200, and in another week by 150. The fall in the week ended the 20th August was occasioned by a sudden reduction in the prevalence of the disease, but it soon rapidly increased again, and the slight falling off in the rate of progression from the beginning of September to the beginning of October was due to the fact that the accommodation was exhausted, and patients could only be received as vacancies were created by the discharge or death of patients, or by the completion and bringing into use of temporary huts. The maximum number under treatment at one time was attained during the week ended Saturday, the 19th November, when, as before stated, on the 17th November 4,001 patients were under treatment.

The fact that for some short time the Managers were compelled to refuse admission to scarlet fever patients, is alleged by the Medical Officer of at least one of the eastern sanitary districts to have been the cause of the spread of the disease within that district. To some extent this must have been the case, because, although only a small number of cases was refused, yet there are so few houses in London in which arrangements for efficient isolation can be made, that each of these cases may have been the cause of infection and further development of the disease.

Smallpox also occasioned some anxiety, as it rapidly increased during April and May (in which latter month 97 cases were admitted), and there appeared reason for fearing that it might become epidemic, and compel the Managers to reserve the Gore Farm Hospital for convalescing smallpox cases exclusively. Fortunately, however, the disease began to abate in June, and this enabled the hospital to be again used for scarlet fever convalescents.

(2.) CHOLERA.—In the autumn of the year the Local Government Board called upon the Managers to organise hospital accommodation and means of transport for cholera cases.

A Special Committee was appointed, and in a very short time upwards of 2,000 beds were reported to be available for cholera cases in general hospitals, workhouse infirmaries, and other institutions. The Committee also obtained a sufficient supply of wheeled litters and stretchers for use at various selected stations, and made satisfactory

arrangements with the Corps of Commissionaires, the National Association for the Employment of Reserve Soldiers, &c., the St. John Ambulance Association, and the Commissioners of Police, for the supply of capable men to man the litters, &c. Fortunately, the necessity for giving effect to these arrangements did not arise, as only five cases of cholera were reported, and they were removed in the Managers' ordinary horse ambulance carriages.

- (3.) RATES OF MORTALITY OF SCARLET FEVER AND DIPHTHERIA CASES TREATED IN THE BOARD'S HOSPITALS, AND OF CASES TREATED IN THEIR OWN HOMES.— Dr. Gayton, the Medical Superintendent of the North-Western Hospital, in the following paragraphs in his Annual Report (p. 48), draws attention to a comparison which is sometimes made of the rates of mortality amongst patients treated in hospitals and those treated in their own homes:—

The consideration of the general and special death-rates of any given hospital is of importance in more senses than one; but when calculated on the mere quantity—apart from the quality—of each particular hospital practice, they are utterly inadmissible, inasmuch as it must be assumed that all the compared hospitals receive cases of equal gravity and danger of life, but this assumption would be grossly inconsistent with facts, the quality of cases received in them for treatment differing not in a trifling degree, but enormously, from one another. Caution must therefore be exercised when the object is to use special death-rates for gauging hospital non-success in relation to particular kinds of disease. That caution, however, having been duly observed, such death-rates may become of the utmost value, for in their perfection they are true measures of medical non-success, and may be made instrumental both to advance professional science and also to enlighten the public mind as to the respective merits of hospitals.

In illustration, it has been pointed out from time to time that the mortality in the Metropolitan fever hospitals is higher than in the homes of those attacked by special febrile disease. This probably is true; but the observations and the facts brought under your notice fortnight after fortnight as to the large number of fatalities occurring within a few hours after admission have not received as yet a similar prominent attention. Thus, in the course of the past year no less than 18 scarlet fever patients and 36 suffering from diphtheria passed away in periods varying from two to 30 hours after their arrival, which, subtracted, would reduce the mortality to 5.63 per cent. and 16.61 per cent. respectively. The conclusion forced upon us is, and the inference must necessarily be, that either sufficient care is not always exercised in regard to the condition of cases for removal, or that the transfer is sometimes postponed until the state of the patient is hopeless. As regards the latter, it is by no means an isolated circumstance to receive a child with a report from the ambulance nurse that the medical man from whose care it has come is of opinion that tracheotomy is imperatively required, which, being done *in extremis*, goes, as a rule, to add to the already too many failures attendant upon the operation. That these unfortunate events will continue to recur is undoubtedly certain; nevertheless, they render the death-rates, calculated on mere numbers of so-called patients, utterly worthless as measures of hospital non-success.

The comparison is one of considerable interest, and one which could not have been made without compulsory notification of infectious disease. But, although venturing to make it in respect of scarlet

fever and diphtheria in the following paragraphs, the Committee is of opinion that the results must be received with caution, inasmuch as they relate to one year only.

Scarlet Fever Mortality.—On reference to page 17, it will be seen that the scarlet fever cases notified in 1892 numbered 27,095, and of that number 13,093 were admitted into the Managers' hospitals. The total deaths from scarlet fever in London during the year are stated in the Registrar-General's Annual Summary to have numbered 1,174, and the number of deaths from the same disease in the Managers' hospitals was 839. If the number of cases admitted to the Managers' hospitals, and the number of deaths which occurred therein, be deducted from the total number notified and the total deaths registered, there would appear to have been 14,002 patients treated in their own homes, with a mortality of 2·3 per cent. Amongst the patients admitted to hospital, however, there was a greater mortality. For of 13,093 patients admitted 839 died, or a mortality of 6·4. Included amongst these 839 deaths were 122 patients who were practically in a moribund condition at the time of their admission.

Diphtheria Mortality.—The return on p. 17 shows that the diphtheria cases notified in 1892 numbered 7,781, and according to the return on p. 81 the admissions to the Board's hospitals numbered 2,009. The total deaths from this disease registered in London during the year numbered 1,885, and of this number 583 occurred in the Managers' hospitals. After deducting the number admitted to the Managers' hospitals and the number of deaths therein, 5,772 would appear to be the number treated at home, of which number 1,302 died, or a percentage of 22·5. Of the cases admitted to the Managers' hospitals 583 died, or 29·1 per cent. Included amongst these 583 deaths were 147 patients who were practically in a moribund condition at the time of their admission.

While the percentage of deaths in the Managers' hospitals is higher than amongst cases treated outside—a fact which it has been customary to ascribe to the worst nourished condition of the cases admitted—yet it is satisfactory to notice that during the past few years the death rates of scarlet fever and diphtheria cases in the Managers' hospitals show marked decreases over those of former years.

- (4.) CASES OF MISTAKEN DIAGNOSIS, AND NECESSITY FOR MEDICAL STUDENTS BECOMING PRACTICALLY ACQUAINTED WITH THE DIAGNOSIS OF FEVER.—These cases continue to illustrate the importance of medical men, before entering into practice, being fully instructed in the diagnosis of infectious disease.

In the course of the year no fewer than 725 patients, or a percentage of 4·4 on the total admissions, were, after admission at the fever hospitals, found not to be suffering from the diseases mentioned in the medical certificates upon which they were removed to hospital.

The largest number of cases of mistaken diagnosis admitted at any one hospital was 328, or 8·1 per cent., and this was at the Eastern Hospital. The Committee is not aware of any reason for this extremely high percentage, but it is, of course, a matter of conjecture whether or not the large number of cheap dispensaries in the eastern district, where probably imperfectly qualified assistants may be employed, is not to some extent answerable for this condition of things.

Of the patients admitted to the Smallpox Hospital Ships 23—or 6·3 per cent.—were not suffering from smallpox.

(5.) STAFF ILLNESS IN THE FEVER AND SMALLPOX HOSPITALS.—On the next page is a summary of the returns submitted by the Medical Superintendents of the several hospitals, showing the total number of members of the staff warded on account of diseases presumably contracted in the performance of their duties. There were 2,137 persons employed during the course of the year, of whom 132, or 6 per cent., fell ill with fever, diphtheria, or measles, and 3 died.

In the preceding year there were 1,160 persons employed, of whom 77—or 6·7 per cent.—fell ill with the before-mentioned diseases, and 2 died.

Considering the large number of new officers engaged during the year, the incidence of fever amongst the staff generally cannot be considered as exceptionally high.

The Committee think it desirable to draw special attention to the remarks on pp. 75–79 of Dr. Ricketts, the Medical Superintendent of the Smallpox Hospital Ships, regarding the incidence of smallpox amongst the staff employed in connection with those vessels, because the facts he adduces undoubtedly prove that this disease is one of the safest to the nurses and other members of the staff, provided they be properly protected by vaccination. In consequence of the small number of admissions of smallpox cases in recent years, Dr. Ricketts has selected the years 1884 to 1892. In the years 1884–5 there was a large epidemic of smallpox, and the number of persons employed at, and in connection with, the ships was very considerable. With the exception of the workmen employed during the year 1884, concerning whom no record can be found, there have been employed during the years 1884 to 1892 no fewer than 1,201 persons, only 6 of whom—or 0·5 per cent.—contracted smallpox, and all recovered.

RESULTS.

Nature of Disease.	OFFICERS.		Eastern Hospital		North-Eastern Hospital		North-Western Hospital		Western Hospital		South-Western Hospital		South-Eastern Hospital		Northern Hospital		Gore Farm Hospital		SUMMARY (Fever Hospitals)		Hospital Ships (Small-pox)		RESULTS.	
	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.	Number of Officers.	Number of days warded.		
Scarlet Fever	Asst. Med. Officer	8	74	48	62	74	48	62	74	48	62	74	48	62	74	48	62	74	48	62	74	48	N.E.H. two remained warded at end of year; others recovered.	
	Assistant Nurses	2	188	1	177	1	177	1	177	1	177	1	177	1	177	1	177	1	177	1	177	1	N.E.H. two, W.H. one, G.F.H. one, and S.E.H. two remained Recovered.	
	Laundrymaid	6	95	2	365	6	365	2	365	2	365	2	365	2	365	2	365	2	365	2	365	2	[warded at end of year; others recovered.	
	Ward Servants	3	65	1	90	6	90	1	90	6	90	1	90	6	90	1	90	6	90	1	90	6	N.E.H. three and N.W.H. one and S.E.H. one remained Recovered.	
	Needlewoman	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	warded at end of year; others recovered.	
	Kitchenmaid	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	Recovered.	
	Porters	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	30	1	Recovered.	
	Assistant Nurses	1	114	1	64	1	64	1	64	1	64	1	64	1	64	1	64	1	64	1	64	1	Recovered.	
	Scarlet Fever followed by Diphtheria	Asst. Med. Officers	2	111	1	10	1	10	1	10	1	10	1	10	1	10	1	10	1	10	1	10	1	Recovered.
		Clinical Assistant	2	62	1	35	1	35	1	35	1	35	1	35	1	35	1	35	1	35	1	35	1	Recovered.
Nurses		6	250	3	111	3	111	3	111	3	111	3	111	3	111	3	111	3	111	3	111	3	Recovered.	
Assistant Nurses		1	35	1	189	1	189	1	189	1	189	1	189	1	189	1	189	1	189	1	189	1	[S.W.H. one died; rest recovered.	
Ward Servants		1	24	1	21	1	21	1	21	1	21	1	21	1	21	1	21	1	21	1	21	1	E.H. one and W.H. one remained warded at end of year;	
Needlewoman		1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	S.E.H. one remained warded at end of year; remainder re-	
Messroom Maids		1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	covered.	
Laundrymaid		1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	Recovered.	
Porter		1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	26	1	Recovered.	
S.E.H. one remained warded at end of year; rest recovered.		1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	Recovered.	
Enteric Fever	Nurses	2	33	2	93	2	93	2	93	2	93	2	93	2	93	2	93	2	93	2	93	2	[rest recovered.	
	Assistant Nurses	1	72	1	61	1	61	1	61	1	61	1	61	1	61	1	61	1	61	1	61	1	W.H. two remained warded at end of year; E.H. one died;	
	Wardmaids	1	53	1	206	1	206	1	206	1	206	1	206	1	206	1	206	1	206	1	206	1	W.H. one remained warded at end of year; S.W.H. one died;	
	Laundrymaids	1	47	1	47	1	47	1	47	1	47	1	47	1	47	1	47	1	47	1	47	1	[rest recovered.	
Measles	Assistant Nurses	2	34	2	34	2	34	2	34	2	34	2	34	2	34	2	34	2	34	2	34	2	W.H. one remained warded; other recovered.	
	Wardmaids	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	19	1	Recovered.	
Smallpox	Assistant Nurse	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Recovered.	
	Wardmaid	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	Recovered.	
Number employed	Males	27	334	9	527	28	1172	11	380	7	407	6	248	130	5,518	2	†	48	†	48	†	†		
	Females	169	334	18	527	34	1172	24	380	26	407	67	248	276	5,518	2	†	99	†	99	†			
Number engaged during the year	TOTALS	*196	334	301	1172	244	380	131	407	338	407	248	1,990	147	147	147	147	147	147	147	147	147		
	Males	13	334	16	527	14	1172	8	380	10	407	67	248	176	5,518	2	†	22	†	22	†			
Number that left during the year	Females	215	334	157	527	103	1172	137	380	92	407	271	248	1,317	76	76	76	76	76	76	76	76		
	TOTALS	228	334	173	1172	117	380	145	407	102	407	338	248	1,493	98	98	98	98	98	98	98	98		
Number that left during the year	Males	13	334	12	527	12	1172	8	380	8	407	18	248	87	5,518	12	12	12	12	12	12	12		
	Females	169	334	121	527	69	1172	112	380	60	407	81	248	707	27	27	27	27	27	27	27	27		
TOTALS	182	334	133	1172	81	380	120	407	68	407	99	248	794	39	39	39	39	39	39	39	39	39		

* Average daily number employed. † Not recorded.

(6.) **ADDITIONAL HOSPITAL ACCOMMODATION.**—The course of events during the past year was strikingly confirmative of the opinion expressed by the Committee in previous Reports regarding the necessity for the provision of additional permanent hospital accommodation.

The Committee is therefore pleased to place on record that the Managers are making arrangements to secure sites which will enable them to erect hospitals to contain such a number of beds in the aggregate as will, when added to the total of the existing accommodation, provide about one bed per 1,000 of the population, which is generally accepted as a reasonable provision.

Isolation Accommodation.—In connection with the foregoing, the Committee draws attention to the Report of the Medical Superintendent of the South-Western Hospital, p. 56, in which, after referring to the fact that 116 cases entered that hospital wrongly certified, and that of that number 20 subsequently developed fever, he adds:—

The paramount importance of having an ample number of isolation beds in every fever hospital cannot be too strongly or too often insisted upon, in face of facts such as these. Patients suffering from some other definite form of disease can be easily disposed of. If no isolation beds remain unoccupied, it is better, in the interest of the patient himself, that he should be sent home again, rather than be subjected, or if himself suffering from another contagious affection, subject others, to the risk of contracting a second and possibly fatal disorder. It is the simply negative cases which are the difficulty—cases which, however certain one may feel about them in one's own mind, cannot be lightly returned, as their rejection may involve serious consequences, not only to the man returning them, but also to the private practitioner and to the patient's own friends.

If such a case be admitted to the general ward and harm accrue, it is true that the medical man originally certifying must bear the legal responsibility, but at the same time considerable moral responsibility must rest with the Medical Officer at the hospital, who, as a skilled and responsible official, is entrusted with the allocation of all cases sent up for admission. As the result of some years' experience in dealing with infectious disease, I hold strongly to the opinion that in every fever hospital there should be at least one bed in every 15 reserved for isolation purposes. It is possible that in years to come, when the beneficial effect of practical instruction to students in the diagnosis of infectious disease has had time to make itself felt, this proportion may be reduced; but the necessity for providing considerable means of isolation will always exist, if only in view of the fact that two or more infectious diseases are often co-existent in the same individual, to say nothing of the inexactness of medical science.

(7.) **AMBULANCE WORK.**—The Report of the Ambulance Committee for the year 1892, which is entered on pp. 173 to 186, refers to the discipline which has been satisfactorily maintained throughout the service, and records their high appreciation of the care and tact with which the nurses supplied for ambulance duty have performed their important duties.

Since the establishment of the Land Ambulance Service in 1881, 73,342 fever and smallpox patients have been removed from their

homes to the various hospitals, and 13,406 recovered patients have been removed from the hospitals to their homes. From 1884 to the end of 1892, 5,153 smallpox patients had been transferred from the London hospitals to the Managers' wharves on the river Thames, *en route* for the hospital ships at Long Reach. Further, since September, 1887, 19,561 convalescing fever patients have been transferred from the London hospitals to country hospitals, and 15,032 recovered patients have been brought back to London from the Northern Hospital; and since 1890, 2,651 have been brought back from the Gore Farm Hospital at Darent. From near the end of 1889 to the close of 1892, 688 patients were conveyed to other places than the Managers' hospitals. In all, 130,121 removals have been effected since the establishment of this service.

The River Ambulance Service was not established until the outbreak of the last smallpox epidemic in February, 1884. From that date until the end of 1892 the ambulance steamers have carried 11,698 smallpox patients to the hospital ships, and have brought back 10,646 recovered patients.

The total removals of patients effected by the Land and River Ambulances number 152,465, without including the conveyance of visitors to patients, staff, &c.

These removals have been carried out in all weathers and throughout all seasons of the year, and to a great extent during the night, without detriment to the patients, and without serious accident or mishap to any person.

- (8.) ADDITIONAL ACCOMMODATION FOR IMBECILES.—In its last Report the Committee remarked on the necessity for further accommodation being provided for imbecile patients, and drew attention to the suggestion of Dr. Elliot, the Medical Superintendent of the Caterham Asylum, that an asylum infirmary should be erected within the London district for the reception of the helpless, feeble, and very aged persons of unsound mind, who require permanent infirmary treatment, and who would thus be spared the shock and risk of the long journey to the existing distant asylums, in addition to which they would be easily accessible to their relatives, who naturally desire to visit them frequently during the comparatively brief time they are likely to live.

The Medical Superintendents of the asylums at Leavesden and Caterham (the asylum at Darent is now mainly used for the reception of patients from the adjoining schools on their attaining 16 years of age) again draw attention to the advanced age of some of the patients admitted. Dr. Case, of the Leavesden Asylum, especially mentions one

old lady of 102 years, who he states “is bright-eyed, has a capital “memory for past events, is able to leave her bed, reads, and at times “pretends to do a little sewing. She was upset by the journey here “from town, but rallied in a few days.”

The Committee are therefore glad to learn that after due consideration the Managers have empowered the General Purposes Committee to look out for a site, and to submit a scheme for the establishment thereon of an asylum infirmary in, or within an easy distance of, the Metropolis.

(9.) TRAINING SHIP “EXMOUTH.”—The Reports of the Committee and Captain-Superintendent of this vessel for the year 1892 will be found on pp.

The Reports of Her Majesty’s Inspector of Poor Law Schools continue to be thoroughly satisfactory, and every success is met with in drafting boys trained on the “Exmouth” into Her Majesty’s Navy, the Mercantile Marine, and other services. The number of boys entered into the Royal Navy from the “Exmouth” during the year was 83, whilst the aggregate number of similar entries from all the other training ships in the United Kingdom was only 108.

Since the destruction, in December, 1875, of the “Goliath” by fire, and the establishment of the “Exmouth” in its place, for the benefit of the whole Metropolis, instead of, as was the former vessel, for a few east-end unions only, there have been 4,972 boys admitted on board. Of that number, 1,372 have entered the Royal Navy, 1,717 were discharged for service in the Mercantile Marine (36 being enrolled in the 3rd class Naval Reserve), 649 have entered Her Majesty’s Army as musicians, 9 were discharged to situations on land (3 of whom subsequently went to sea), 663 were discharged to their respective unions for various reasons, by orders of the Boards of Guardians, and 23 have died.

The number of boys under training at the end of the year was 539, as compared with 487 at the end of 1891.

Six of the boys admitted were from unions outside the Metropolis. They were received under the power given to the Managers by order of the Local Government Board in the year 1891.

II.—NOTIFICATION STATISTICS AND SPOTTED MAPS.

The following table shows the number of Notifications of, and the Deaths from, those Notifiable Diseases which are eligible for admission to the Managers’ Hospitals, the ratio of such Notifications and Deaths to the population, the number of Notifications of other Notifiable Diseases, and the grand total of cases notified during 1891:—

TABLE A.

Local Authorities in whose Districts the cases were resident.	Enumerated Population, 1891.	NOTIFICATIONS OF, AND DEATHS FROM, THOSE NOTIFIABLE DISEASES WHICH ARE ELIGIBLE FOR ADMISSION TO THE MANAGERS' HOSPITALS.														NOTIFICATIONS OF OTHER NOTIFIABLE DISEASES.							GRAND TOTAL OF NOTIFICATIONS.																			
		NOTIFICATIONS.							DEATHS.																																	
		Smallpox.	Scarlet Fever.	Diphtheria.	Enteric or Typhoid Fever.	Typhus Fever.	TOTAL NOTIFICATIONS.	Annual Rate per 1,000 persons living.	Smallpox.	Scarlet Fever.	Diphtheria.	Enteric or Typhoid Fever.	Typhus Fever.	TOTAL DEATHS.	Annual Rate per 1,000 persons living.	Relapsing Fever.	Membranous Group.	Continued Fever.	Cholera.	Erysipelas.	Puerperal Fever.	TOTAL.																				
WEST DISTRICTS.																																										
Kensington	166,308	3	727	172	58	1	961	5.8	—	37	34	15	—	86	0.52	1	15	4	5	184	13	222	1,183																			
Fulham	91,639	2	527	94	41	—	664	6.8	—	29	31	1	—	61	0.62	—	15	—	—	107	10	132	796																			
Hammersmith	97,239	2	459	312	45	—	818	8.2	—	13	73	4	—	90	0.90	—	6	8	—	120	6	140	958																			
Paddington	117,846	3	541	168	47	—	759	6.4	—	21	28	8	—	57	0.48	—	4	1	—	115	7	127	886																			
Chelsea	96,253	4	533	167	51	—	755	7.8	1	27	39	6	—	73	0.75	—	36	3	1	180	6	226	981																			
St. George, Hanover Square...	78,364	1	335	122	44	—	502	6.5	—	11	26	8	—	45	0.59	—	—	1	1	58	2	62	564																			
Westminster	55,774	2	295	138	24	—	459	8.3	—	18	44	3	—	65	1.18	—	3	4	—	77	3	87	546																			
St. James, Westminster ...	24,995	4	69	26	13	—	112	4.6	—	5	6	1	—	12	0.49	—	2	1	1	20	1	25	137																			
St. Peter's, Westminster ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																			
NORTH DISTRICTS.																																										
Marylebone	142,404	11	702	218	73	1	1,005	7.2	—	54	48	15	1	118	0.84	2	8	6	3	243	6	268	1,273																			
Hampstead	68,416	1	322	129	49	—	501	7.0	—	5	27	2	—	34	0.48	—	3	1	—	54	8	66	567																			
St. Pancras	234,379	34	1,294	408	118	—	1,854	7.9	2	67	107	25	—	201	0.86	2	30	4	5	426	26	493	2,347																			
Islington	319,143	42	1,726	709	215	—	2,692	8.3	3	53	150	40	—	246	0.76	—	45	6	3	531	50	635	3,327																			
Hackney	229,542	27	1,958	617	181	1	2,784	11.9	1	66	131	23	—	221	0.94	—	35	10	—	353	16	414	3,198																			
CENTRAL DISTRICTS.																																										
St. Giles	39,782	7	175	60	26	—	268	6.9	—	5	21	9	—	35	0.90	—	3	—	—	105	1	109	377																			
Gray's Inn	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—																			
St. Martin-in-the-Fields ...	14,616	—	54	25	6	—	85	6.0	—	4	12	—	—	16	1.13	—	1	2	—	14	—	17	102																			
Strand	25,217	7	111	28	12	—	158	6.5	—	3	8	4	—	15	0.62	—	4	—	—	22	1	27	185																			
Holborn	33,264	3	294	61	24	—	382	11.6	—	13	17	4	—	34	1.04	—	—	1	2	81	3	87	469																			
Clerkenwell	66,216	3	379	114	43	—	539	8.3	—	21	28	8	—	57	0.87	—	16	2	—	164	3	185	724																			
St. Luke	42,440	9	229	42	14	3	297	7.1	4	9	14	2	1	30	0.72	—	3	2	—	103	1	109	406																			
City of London	38,320	5	284	91	28	—	408	11.1	—	12	24	5	—	41	1.12	—	2	1	—	51	1	55	463																			
EAST DISTRICTS.																																										
Shoreditch	124,009	83	830	202	89	2	1,206	9.8	4	36	44	13	1	98	0.79	—	15	5	—	253	11	284	1,490																			
Bethnal Green	129,132	36	932	532	102	—	1,602	12.4	5	56	117	20	—	198	1.53	—	44	3	—	336	14	397	1,999																			
Whitechapel	74,462	23	539	242	42	1	847	11.3	—	34	59	5	1	99	1.33	—	16	—	—	177	11	204	1,051																			
St. George-in-the-East	45,795	4	289	126	21	—	440	9.7	1	34	33	9	—	77	1.70	—	6	3	2	77	5	93	533																			
Limehouse	57,376	7	511	80	40	—	638	11.1	—	28	25	7	—	60	1.05	—	12	—	—	100	7	119	757																			
Mile End Old Town	107,592	10	954	249	79	—	1,292	12.0	1	39	81	16	—	137	1.27	—	9	1	1	235	13	259	1,551																			
Poplar	166,748	5	1,470	436	183	—	2,094	12.5	—	64	78	26	—	168	1.00	1	48	20	3	340	12	424	2,518																			
SOUTH DISTRICTS.																																										
St. Saviour, Southwark ...	27,177	—	121	39	5	—	165	6.1	—	7	6	1	1	15	0.56	—	3	—	—	37	2	42	207																			
St. George, Southwark ...	59,712	2	375	74	28	—	479	8.0	—	17	26	7	—	50	0.84	—	2	—	—	108	4	114	593																			
Newington	115,804	—	955	151	58	1	1,165	10.0	—	45	38	10	1	94	0.81	—	18	—	—	226	5	249	1,414																			
St. Olave, Southwark	12,723	1	64	16	7	—	88	6.9	—	3	3	2	—	8	0.63	—	1	—	—	21	—	22	110																			
Bermondsey	84,682	2	645	89	43	1	780	9.3	—	30	20	6	1	57	0.68	—	7	—	1	170	5	183	963																			
Rotherhithe	39,255	—	167	43	49	2	261	6.6	—	6	11	7	2	26	0.66	—	5	—	—	73	2	80	341																			
Lambeth	275,203	24	1,777	491	119	2	2,413	8.7	1	76	130	22	—	229	0.83	—	44	35	25	410	17	531	2,944																			
Battersea	150,558	4	1,131	353	70	—	1,558	10.0	1	43	54	10	—	108	0.69	—	17	7	—	286	15	325	1,883																			
Wandsworth	156,942	—	886	239	85	—	1,210	7.4	—	29	65	13	—	107	0.65	—	22	11	1	271	13	318	1,528																			
Camberwell	235,344	16	1,549	281	103	—	1,949	8.1	1	63	78	22	—	164	0.68	—	32	2	—	280	15	329	2,278																			
Greenwich	165,413	11	1,282	173	116	3	1,585	9.4	1	37	52	23	1	114	0.67	1	20	2	—	304	9	336	1,921																			
Lewisham (excluding Penge)	72,272	—	273	123	40	—	436	5.9	—	3	20	4	1	28	0.38	—	2	—	—	97	3	102	538																			
Woolwich	40,848	2	338	16	17	—	373	9.0	—	11	4	11	—	26	0.63	—	—	—	—	45	3	48	421																			
Plumstead	88,539	19	993	124	40	2	1,178	12.9	3	33	44	7	—	87	0.95	—	11	1	—	79	7	98	1,276																			
Port Sanitary Authority ...	—	4	—	—	17	—	22	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	23																			
Totals	4,211,743	423	27,095	7,781	2,465	20	37,784	8.9	29	1,167	1,856	424	11	3,487	0.82	7	565	147	54	6,934	337	8,044	45,828																			

Graphic statistics of the prevalence of the principal fevers throughout the Metropolis will be found upon reference to the spotted maps enclosed in the pocket at the end of this volume.

In all, there are seven maps, dealing with five diseases.

Scarlet Fever cases are spotted on four maps—one for each quarter of the year. This was done because not only were the cases too numerous to be shown clearly on one map of the size selected, but because it was thought that quarterly maps would have the additional interest of illustrating and comparing the prevalence of the disease during the different seasons of the year.

The map for the first quarter shows that the disease was well distributed over the Metropolitan area, and that for the second quarter shows a considerable increase, but slight as compared with the increases of the third and fourth quarters. The four maps taken together show the persistency with which scarlet fever prevails in any locality in which it becomes established.

In the *Diphtheria* map, the prevalence of the disease in certain localities is well defined. In Whitechapel, Bethnal Green, the northern part of Poplar, the central part of Hackney, the north of Islington, the north of Kensington, Hammersmith, and parts of St. Marylebone, Westminster, Battersea, and the north end of Lambeth, the disease appears to have been particularly prevalent.

On the *Enteric Fever* map, but few considerable aggregations of cases are apparent.

Smallpox and *Typhus Fever* cases are shown on one map, the former being represented by crosses and the latter by spots.

Typhus fever has, for some years past, been practically stamped out in London, and there are very few cases now occurring.

Of smallpox the most notable outbreaks occurred in Shoreditch, Bethnal Green, Islington, St. Pancras, Lambeth, and Plumstead.

III.—FEVER STATISTICS, 1892.

Summary of Table I. (p. 81).—At the beginning of the year there were 1,844 fever, diphtheria, and other patients under treatment in the fever hospitals then open.

The number under treatment declined during the first three months of the year, until the minimum number—namely, 1,438—was reached, which was on the 5th March; and there was very little increase from this date until the middle of April, when the numbers began steadily to rise, and, increasing rapidly from June to October, reached the maximum—4,389—on the 17th November. That number, which was

more by 2,334 than in the preceding year, was distributed amongst the various hospitals as follows:—

HOSPITAL.	BEDS OCCUPIED.					
	Scarlet.	Diph- theria.	Typhus.	Enteric.	Other Diseases.	TOTAL.
Eastern Hospital... ..	391	57	...	44	...	492
North-Eastern Hospital ...	493	...	...	...	...	493
North-Western ,, ...	395	86	...	23	...	504
Western ,, ...	303	37	1	14	1	356
South-Western ,, ...	306	55	...	24	...	385
South-Eastern ,, ...	388	16	...	16	...	420
Northern ,, ...	913	14	...	...	...	927
Gore Farm ,, ...	812	...	...	...	...	812
Totals	4,001	265	1	121	1	4,389

The total number of patients under treatment during the year was 18,120, as compared with 9,745 in the preceding year, and was greater by 7,997 than in any former year.

The total admissions were 16,276, as compared with 7,809 in 1891, 8,334 in 1890, 5,772 in 1889, 5,152 in 1888, and 6,537 in 1887. Up to the latter year the largest number admitted in any one year had been 2,867 in 1882.

The total discharges during the year were 12,936, and the deaths were 1,629, or a total mortality of 10·55, as compared with 12·26 in the preceding year.

Summary of Table II. (p. 83).—The total monthly admissions of all cases were lowest in February, and highest in October.

The accompanying diagram shows the monthly admissions of each kind of fever from the date of opening of the first of the Managers' hospitals in 1872 to the end of 1892.

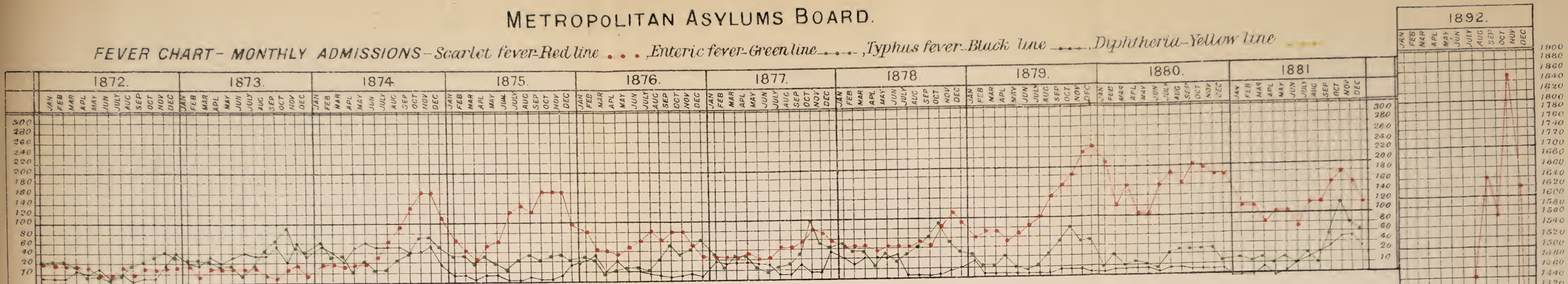
The curves relating to the scarlet and enteric fevers clearly indicate the seasonal prevalence of those diseases. During the twenty-one years the scarlet fever admissions fell to the minimum six times in February, four times in March, five times in April, four times in June, once in September, and once in December (1888); while the maximum number was reached once in January (1888), once in July, three times in September, ten times in October, four times in November, and twice in December. The enteric fever admissions fell to the minimum three times in March, five times in April, five times in May, seven times in June, and once in July; and rose to the maximum twice in September, twelve times in October, six times in November, and once in December.

Typhus fever has only occurred in the Metropolis in small local outbreaks.

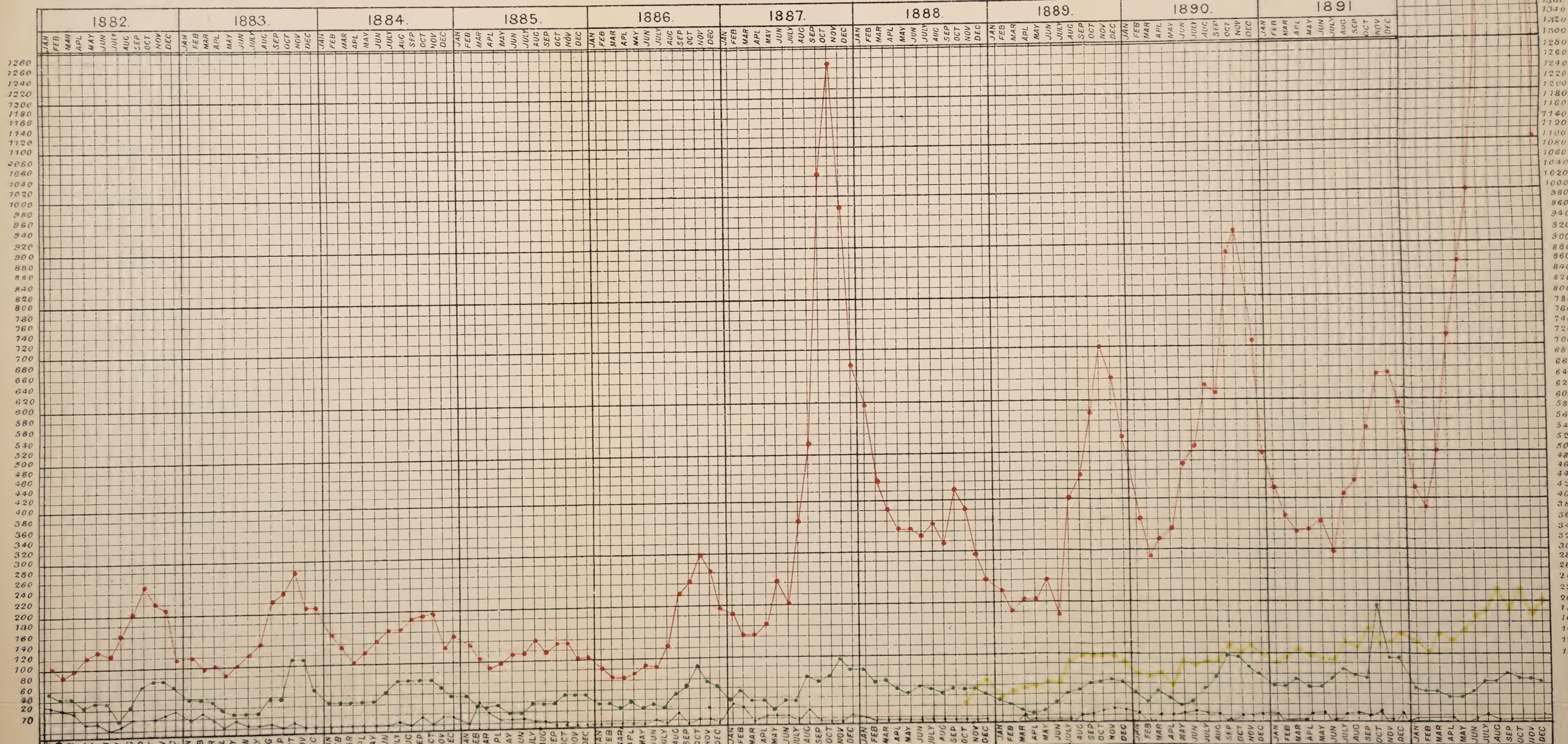
Diphtheria cases were not admitted to the Managers' hospitals until the 23rd October, 1888. During the years 1889 and 1891 the

METROPOLITAN ASYLUMS BOARD.

FEVER CHART - MONTHLY ADMISSIONS - Scarlet fever - Red line . . . Enteric fever - Green line . . . Typhus fever - Black line . . . Diphtheria - Yellow line



FEVER CHART - MONTHLY ADMISSIONS (Continued).



NOTE - Diphtheria cases were not admitted into the Board's Hospitals until the 23rd October 1888.

minimum admissions took place in January, in 1890 in April, and in 1892 in February; and the maximum admissions of 1889 in November, of 1890 and 1891 in September, and of 1892 in August.

Summary of Table III. (p. 87).—Scarlet fever, diphtheria, and enteric cases were admitted from every parish and union in the district.

The typhus fever cases, 19 in number, were admitted from seven different districts, eight coming from the St. Olave's Union.

Summary of Table IV. (p. 89).—This table shows the scarlet fever admissions and deaths at various ages. Up to the year 1888 it had been the custom to give the aggregate admissions and deaths of patients in the first five years of life, but the Committee being of opinion that the table would be much more valuable if the figures were given for each of such years separately, it has since been arranged accordingly.

The total admissions of scarlet fever cases in 1892 were 13,093: the female were 717 in excess of the male admissions. The total mortality, calculated on the admissions, was 6·4 per cent., being amongst males 6·8 per cent. and amongst females 6·0 per cent.

The following table is a summary of the tables in this and previous annual Reports:—

SCARLET FEVER.—TABLE B.—*Showing Mortality at various ages of 55,204 cases admitted into the Board's Hospitals in the years 1871 to 1892.*

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 1 ...	154	41	26·6	144	52	36·1	298	93	31·2
1 to 2 ...	529	148	28·0	500	144	28·8	1,029	292	28·4
2 to 3 ...	997	223	22·4	1,078	247	22·9	2,075	470	22·7
3 to 4 ...	1,538	275	17·9	1,478	227	15·4	3,016	502	16·6
4 to 5 ...	1,680	195	11·6	1,714	186	10·9	3,394	381	11·2
Totals	4,898	882	18·0	4,914	856	17·4	9,812	1,738	17·7
Under 5 ...	7,778	1,536	19·7	7,796	1,446	18·5	15,574	2,982	19·1
5 to 10 ...	10,817	688	6·4	12,077	689	5·7	22,894	1,377	6·0
10 to 15 ...	4,427	130	2·9	5,155	143	2·8	9,582	273	2·8
15 to 20 ...	1,683	60	3·6	2,011	49	2·4	3,694	109	3·0
20 to 25 ...	735	20	2·7	1,055	32	3·0	1,790	52	2·9
25 to 30 ...	306	15	4·9	531	17	3·2	837	32	3·8
30 to 35 ...	186	9	4·8	275	15	5·5	461	24	5·2
35 to 40 ...	78	8	10·3	129	5	3·9	207	13	6·3
40 to 45 ...	40	5	10·8	54	1	3·0	94	6	6·1
45 to 50 ...	10	—		26	1		36	1	
50 to 55 ...	12	1		12	—		24	1	
55 to 60 ...	2	1		2	—		4	1	
And upwards	1	—		6	1		7	1	
Totals	26,075	2,473	9·5	29,129	2,399	8·2	55,204	4,872	8·8

N.B.—(1) The figures for each age-period from under 1 to 5 years relate only to the cases admitted during the years 1888-92.

(2) The above table includes deaths within 48 hours after admission, as well as deaths from inter-current maladies.

(3) 2,172 cases are excluded from this return as they were patients admitted into hospitals which also received convalescent patients from other hospitals, and in taking the ages of patients for the purposes of this return it was impossible from the returns in the possession of the Committee to identify the two classes. This accounts for the difference between the total in this table and that in Table F, p. 27.

The relation of age and sex to mortality is clearly indicated by the above table. The disease is most fatal to children under five years of age, and notably so to infants in the first and second years of life. The total mortality of males is greater than that of females by 1·3 per cent.

Up to five years of age the liability of either sex to be attacked appears to be nearly equal, but after that age a greater immunity is enjoyed by the male sex.

Summary of Table V. (p. 90-3) shows the complications observed amongst the scarlet fever cases under treatment during the past year. The most common were the following (the figures in brackets indicate the percentage of cases on the total number under treatment):—Measles (1·8), rheumatism (2·6), tonsillitis (2·0), albuminuria (10·1), acute nephritis (2·9), rhinitis (6·1), otitis (8·8), and adenitis, (9·3). Diphtheria was also observed in 1·3 per cent. of the cases, and a diphtheritic condition of the fauces in 0·8 per cent.

Summary of Table VI. (p. 95) shows the admissions and deaths at various ages of diphtheria cases during the past year.

The following table is a summary of the tables in this and the previous annual Reports for 1888, 1889, 1890, and 1891:—

DIPHTHERIA.—TABLE C—*Showing Mortality at various ages of 5,084 cases admitted into the Board's Hospitals in the years 1888 to 1892.*

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 1 ...	57	35	61·4	49	30	61·2	106	65	61·3
1 to 2 ...	144	97	67·4	137	88	64·2	281	185	65·8
2 to 3 ...	199	124	62·3	221	133	60·2	420	257	61·2
3 to 4 ...	254	131	51·6	276	136	49·3	530	267	50·4
4 to 5 ...	245	109	44·5	329	148	45·0	574	257	44·8
Total under 5	899	496	55·2	1,012	535	52·9	1,911	1,031	54·0
5 to 10 ...	754	212	28·1	828	260	31·4	1,582	472	29·8
10 to 15 ...	235	24	10·2	352	39	11·1	587	63	10·7
15 to 20 ...	131	6	4·6	240	8	3·3	371	14	3·8
20 to 25 ...	106	6	5·7	176	9	5·1	282	15	5·3
25 to 30 ...	44	3	6·8	112	2	1·8	156	5	3·2
30 to 35 ...	41	1	2·4	44	2	4·5	85	3	3·5
35 to 40 ...	14	2	14·3	31	2	6·5	45	4	8·9
40 to 45 ...	14	1	} 8·0 }	19	1	} 17·5 }	33	2	} 13·8 }
45 to 50 ...	8	—		8	3		16	3	
50 to 55 ...	1	—		6	2		7	2	
55 to 60 ...	1	—		5	—		6	—	
And upwards	1	1		2	1		3	2	
Totals ...	2,249	752		33·4	2,835		864	30·5		5,084	1,616	31·8

Diphtheria, like scarlet fever, is most fatal to infant children. The maximum mortality occurs in the second year of life, when it reaches the high percentage of 65·8, subsequently falling with every additional

year of life to the minimum of 3·2 per cent. amongst persons between 25 and 30 years of age.

The female sex appears to be specially liable to attack by the disease, but the death-rate of females is less than that of males by 2·9 per cent.

Summary of Table VIa. (p. 96-7) shows the complications observed in the diphtheria cases under treatment during the past year. The most numerous were croup, which occurred in 7·9 per cent. of the cases under treatment; paralysis (general and local), in 12·0 per cent.; rhinitis, in 11·0 per cent.; adenitis, in 5·6 per cent.; and albuminuria, in 23·5 per cent.

Summary of Tables VII. (p. 99) shows the admissions and deaths at various ages, of enteric cases during the year.

The following table is a summary of the tables in this and previous annual Reports:—

ENTERIC FEVER.—TABLE D—*Showing Mortality at various ages of 8,145 cases admitted into the Board's Hospitals in the years 1871 to 1892.*

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5 ...	133	16	12·0	123	16	13·0	256	32	12·5
5 to 10 ...	545	49	9·0	537	47	8·8	1,082	96	8·9
10 to 15 ...	1,020	97	9·5	873	148	17·0	1,893	245	12·9
15 to 20 ...	965	141	14·6	877	184	21·0	1,842	325	17·6
20 to 25 ...	622	137	22·0	601	109	18·1	1,223	246	20·1
25 to 30 ...	445	103	23·1	357	77	21·6	802	180	22·4
30 to 35 ...	241	72	29·9	222	45	20·3	463	117	25·3
35 to 40 ...	142	42	29·6	137	32	23·4	279	74	26·5
40 to 45 ...	78	21	} 36·0 }	70	14	} 21·9 }	148	35	} 28·9 }
45 to 50 ...	41	18		51	11		92	29	
50 to 55 ...	18	9		21	4		39	13	
55 to 60 ...	6	3		8	4		14	7	
And upwards	7	3		5	1		12	4	
Totals ...	4,263	711	16·7	3,882	692	17·8	8,145	1,403	17·2

N.B.—(1) The above table includes deaths within 48 hours after admission, as well as deaths from intercurrent maladies.

(2) The total number does not correspond with Table F, p. 27, for similar reasons to those given in note 3 to Table B, p. 21.

The number of cases of enteric fever under five years of age is comparatively small.

The lowest death-rate is amongst patients between 5 and 10 years of age; it then increases with each quinquennium, until it attains a percentage of 26·5 amongst patients between 35 and 40 years of age, and of 28·9 amongst the patients of ages from 40 to 60 and upwards.

The male sex is evidently more liable to attack by this disease; but its fatality is greater amongst females by 1·1 per cent. There are striking variations in the relative mortality in the sexes at different age-periods. Between the ages of 10 and 20 the death-rate is much greater amongst females, but it is entirely reversed in all later age-periods.

Summary of Table VIIa. (p. 100) shows the complications observed in the enteric fever cases under treatment during the past year. Relapse occurred in 7·8 per cent. of the total cases under treatment; bronchitis in 5·2 per cent.; perforation and peritonitis in 2·2; hæmorrhage in 5·3; and albuminuria in 4·9 per cent.

Table VIII. (p. 101) shows the admissions and deaths at various ages of typhus fever cases at the Eastern, Western, and South-Western Hospitals.

The following table is a summary of the tables in this and former annual Reports:—

TYPHUS FEVER.—TABLE E—*Showing Mortality at various ages of 2,158 cases admitted into the Board's Hospitals in the years 1871 to 1892.*

AGES.	MALES.			FEMALES.			TOTAL.		
	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Mortality per cent.	Cases Admitted.	Died.	Combined Mortality per cent.
Under 5 ...	40	1	2·5	48	1	2·1	88	2	2·3
5 to 10 ...	105	1	1·0	139	—	—	244	1	0·4
10 „ 15 ...	167	3	1·8	207	11	5·3	374	14	3·7
15 „ 20 ...	161	10	6·2	197	18	9·1	358	28	7·8
20 „ 25 ...	123	28	22·7	124	22	17·7	247	50	20·2
25 „ 30 ...	76	21	27·6	82	15	18·3	158	36	22·8
30 „ 35 ..	75	25	33·3	85	22	25·9	160	47	29·4
35 „ 40 ...	57	26	45·6	76	21	27·6	133	47	35·3
40 „ 45 ...	75	46	61·3	95	35	36·8	170	81	47·6
45 „ 50 ...	42	21	50·0	54	21	38·9	96	42	43·7
50 „ 55 ...	22	15	68·2	38	21	55·3	60	36	60·0
55 „ 60 ...	14	9	64·3	18	15	83·3	32	24	75·0
And upwards	16	12	75·0	22	15	68·2	38	27	71·1
Totals ...	973	218	22·4	1,185	217	18·3	2,158	435	20·2

N.B.—(1) The above table includes deaths within 48 hours after admission, as well as deaths from intercurrent maladies.

(2) The total number does not correspond with Table F, p. 27, for similar reasons to those given in note 3 to Table B, p. 21.

Young children appear to be less liable to attack by typhus fever than adolescents or adults. At all ages more females than males have been admitted.

The death-rate of females is less by 4·1 per cent. than that of males. The mortality in both sexes is greatly influenced by age. Up to the twentieth year the rate does not exceed 7·8 per cent.; but in the quinquennium 20 to 25 it suddenly rises to 20·2 per cent., and increases during every later age-period.

Summary of Table IX. (pp. 103–9) shows the total admissions during the year of patients having other diseases than scarlet, enteric, and typhus fevers and diphtheria. The form of the table is so arranged as to show not only the diseases from which the patients actually suffered, but also the diseases from which they were stated to be suffering by the certificate under which they were removed to hospital.

The percentage of these cases of mistaken diagnosis was, as regards scarlet fever cases, 2·3; diphtheria cases, 12·3; enteric cases, 44·1; and typhus cases, 26·3 per cent.

Amongst the 295 cases certified as scarlet fever, 2 had smallpox, 88 measles, 6 diphtheria, 33 epidemic rose-rash, 10 febricula, 12 pneumonia, and 20 tonsillitis, and 39 had nothing the matter with them. Amongst the 249 cases certified as diphtheria, 12 had measles, 12 scarlet fever, 154 tonsillitis, and 12 had pharyngitis.

Amongst the 190 cases certified as enteric fever, 20 had febricula, 46 pneumonia, and 10 meningitis.

It will be observed that in this table the number of cases admitted at the South-Western Hospital is stated at 116, whereas in Table I. the number is 88. The following is the explanation given by Dr. Caiger, the Medical Superintendent of that hospital:—

The reason why the number of "other diseases" in Table No. I. (88) does not agree with that in Table No. IX. (116), is that the latter number expresses the cases *wrongly certified* whatever their real nature; and as 20 of them were cases of scarlet fever, diphtheria, or enteric, they appear in the respective tables enumerating those particular diseases, and so cannot be reckoned as cases of "other disease" in Table I.

For the same reason 8 negative cases which appear in Table IX. sent up wrongly certified as scarlet fever, having developed that disease after admission to the ward, also appear in the scarlet fever return in Table No. I.

I have marked these cases on Table IX. thus: * and † respectively.

IV.—SMALLPOX STATISTICS, 1892.

Altogether, 348 patients suffering from smallpox, or certified to be so suffering, were admitted into the Managers' hospitals during the year 1892, which was a greater number than in any year since 1885. Of that number, two were sent into the North-Western Hospital certified as scarlet fever; one recovered there, and the other was transferred to, and died the day after at, the South-Eastern Hospital. At the last-mentioned hospital three severe cases were admitted direct from their homes, and died shortly after. The remaining 343 cases were admitted to and treated at the hospital ships; but 24 of the number (including an infant sent to hospital with its mother) were not suffering from smallpox at the time of admission.

For information regarding the origin and spread of the disease, the Committee refers to the Report of Dr. Ricketts, the Medical Superintendent of the smallpox hospital ships (pp. 67–79), and to the Report of the Ambulance Committee (pp. 173–186). Dr. Ricketts considered the outbreak "a most instructive example of the way in which small-pox may spread in spite of such a perfect organisation for the isolation of infected persons as exists in London" (p. 75).

Statistics.—Table I, on pp. 110-113, shows the number of smallpox patients admitted from each parish or union during each month of the year 1892, and the total admissions for the year. It also shows the total deaths and discharges, and the number remaining under treatment at the beginning and end of the year.

On the 1st January there were 3 patients under treatment. During the month 5 were admitted, 8 in February, 50 in March, 36 in April, and 97 in May. The admissions then began to decline, from 37 in June, 17 in July, to 5 in August, and 2 each in September and October.

In November, however, the disease appeared to take a fresh start, 20 patients being admitted, and 42 in December.

The fact that the disease had appeared in 28 out of the 30 Poor Law Districts into which the Metropolis is divided, and that it was known to be prevalent in many of the provincial towns and in places in the suburbs of London, naturally occasioned the Managers some anxiety, and led them to anticipate and make provision for a considerable increase in the prevalence of the disease in the year 1893.

On pp. 114 to 125 are tables which supply detailed particulars concerning the vaccination of patients admitted.

In Table IIc. (which is a continuation of Tables IIa. and IIb.) it will be seen that primary vaccination cicatrices were present in 218 cases, of whom 3 died. In 40 cases there was “no evidence” as to cicatrices—(these were cases said to have been vaccinated, but bearing no visible evidence of the operation, and cases in which no statement was made, but the nature of the eruption or other cause prevented any observations of the marks if any existed)—of whom 13 died; and in 62 cases vaccination cicatrices were absent, 17 of whom died. Of the above-mentioned 24 patients who were not suffering from smallpox at the time of their admission, 10 afterwards developed the disease, and one died.

V.—FEVER AND SMALLPOX STATISTICS OF PAST YEARS.

On the two succeeding pages are returns which show the annual admissions and deaths of patients at the Managers' Fever and Smallpox Hospitals, with the mortality per cent. since the establishment of the first hospital in 1870, together with extracts from the Registrar-General's Annual Summaries, showing the annual mortality per 1,000 persons living of the population of the Metropolis from scarlet, typhus, and enteric fevers, and smallpox, and the annual average mortality from those diseases for certain specified years before and since the establishment of the Managers' hospitals.

Table F—Showing the Admissions and Deaths of Patients and Mortality per cent. at the Managers' FEVER HOSPITALS during each Year since the opening of the first Hospital on the 25th January, 1870, together with the Annual Mortality per 1,000 persons living of the Population of the Metropolis from Scarlet, Typhus, and Enteric Fevers, and Diphtheria, extracted from the Registrar-General's Annual Summaries.

YEAR.	ADMISSIONS.					DEATHS.					Mortality per cent. of Patients treated in Managers' Hospitals.				Annual Mortality per 1,000 of estimated Population.					
	Scarlet.	Diphtheria	Typhus.	Enteric.	Other Diseases.	Total.	Scarlet.	Diphtheria	Typhus.	Enteric.	Other Diseases.	Total.	Relapsing Fever.	Diphtheria	Typhus.	Enteric.	Scarlet.	Diphtheria	Typhus.	Enteric.
1870 (25th Jan. to 15th May)	218	218	14	14	12.84	1.88	0.10	0.15	0.30
1871	Scarlet	0.58	0.11	0.12	0.27
1872 (15 months to 31st Dec., 1872)	108	...	134	279	343	864	57	...	...	70	...	168	10.78	...	...	21.96	0.28	0.05	0.24
1873	92	...	401	381	271	1,145	56	...	...	58	...	211	6.55	...	...	15.13	0.19	0.08	0.27
1874	804	...	536	435	359	2,134	63	...	...	84	...	342	12.15	...	...	14.87	0.77	0.09	0.26
1875	1,182	...	65	299	269	1,815	78	...	...	54	...	308	13.69	...	...	24.68	1.06	0.04	0.23
1876	671	...	139	288	294	1,892	59	...	...	71	...	248	12.13	...	...	20.34	0.65	0.04	0.22
1877	479	...	170	372	186	1,207	79	...	...	33	...	202	12.1	...	...	22.93	0.44	0.04	0.25
1878	679	...	168	434	233	1,564	100	...	...	40	...	278	14.34	...	...	20.26	0.49	0.04	0.28
1879	1,469	...	48	385	196	2,098	74	...	...	39	...	335	15.27	...	...	19.73	0.72	0.02	0.23
1880	1,949	...	28	248	239	2,464	43	...	...	37	...	328	12.3	...	...	15.63	0.82	0.14	0.19
1881	1,477	...	219	415	211	2,322	86	...	...	46	...	334	11.1	...	...	21.47	0.55	0.17	0.25
1882	1,850	...	148	515	354	2,867	104	...	...	60	...	380	10.37	...	...	20.71	0.52	0.22	0.25
1883	1,920	...	45	486	269	2,720	74	...	...	66	...	385	12.38	...	...	15.64	0.51	0.24	0.25
1884	1,845	...	29	493	180	2,547	98	...	...	55	...	392	12.27	...	...	18.82	0.36	0.24	0.23
1885	1,353	...	53	220	229	1,855	36	...	...	46	...	219	9.47	...	...	15.82	0.18	0.23	0.15
1886	1,780	...	10	333	74	2,197	47	...	...	22	...	224	9.04	...	...	14.85	0.17	0.21	0.15
1887	5,900	...	35	441	161	6,537	61	...	...	59	...	613	9.54	...	...	14.59	0.36	0.23	0.15
1888	4,408	...	1	450	194	5,152	72	...	...	60	...	679	9.89	...	...	14.64	0.30	0.32	0.17
1889	4,518	...	23	290	219	5,772	41	...	...	48	...	736	8.85	...	...	15.15	0.19	0.39	0.13
1890	6,537	...	16	498	341	8,334	93	...	...	81	...	1,005	7.86	...	...	19.68	0.21	0.33	0.15
1891	5,262	...	18	755	462	7,809	106	...	...	102	...	963	6.67	...	...	14.52	0.14	0.32	0.13
1892	13,093	...	19	430	725	16,276	65	...	...	140	...	1,629	7.28	...	...	13.20	0.27	0.44	0.10
Totals	57,376	5,084	2,305	8,497	6,027	79,289	1,492	1,285	477	1,617	9,993	10.04	32.53	20.69	17.64

Average Annual Mortality per 1,000 of estimated population of London before the opening of the Managers' Hospitals, extracted from the Registrar-General's Returns:—
 Scarlet Fever (only obtainable for 13 years), 1859 to 1871, both inclusive
 Typhus Fever (only obtainable for 3 years), 1869 to 1871, both inclusive
 Enteric Fever ditto ditto
 Average Annual Mortality per 1,000 of estimated population of London from Scarlet Fever during the past 13 years, and from Typhus and Enteric Fevers during the past 3 years, extracted from the Registrar-General's Returns
 Increase
 Decrease

NOTE.—1. From the 1st December, 1870, to the end of September, 1871, Smallpox cases only were admitted to the Board's Hospitals.
 2. The deaths of Fever patients include all cases dying within 48 hours after admission, and also those deaths due to intercurrent maladies.
 3. Diphtheria cases have only been admitted into the Managers' Hospitals since the 23rd October, 1888.
 4. Mortality rates of patients in the Managers' Hospitals are calculated according to the Registrar-General's formula.

Table G—Showing the Admissions and Deaths of Patients and Mortality per cent. at the Managers' SMALLPOX HOSPITALS during each year since the opening of the first Hospital on the 1st December, 1870, together with the Annual Mortality per 1,000 persons living of the Population of the Metropolis from Smallpox, extracted from the Registrar-General's Annual Summaries.

YEAR.	ADMISSIONS.			DEATHS.			Mortality per cent. of Patients treated in Managers' Hospitals.	Annual Mortality per 1,000 of estimated Population.	
	Smallpox.	Other Diseases.	Total.	Smallpox.	Other Diseases.	Total.	Smallpox.	Smallpox.	
1st Dec., 1870, to 3rd Feb., 1871	582	...	582	97	...	97	20·81	...	
1871-2 (4th Feb., 1871, to 31st Jan., 1872)	13,139	6	13,145	2,460	...	2,460	18·95	2·42	
1872-3 (year ended 31st Jan., 1873)	2,359	3	2,362	467	1	468	17·84	0·54	
1873-4 (year ended 31st Jan., 1874)	174	17	191	35	...	35	17·02	0·03	
1874 (11 months ended 31st Dec.)	112	8	120	10	...	10		0·02	
1875	89	22	111	22	...	22		0·01	
1876	2,134	16	2,150	372	1	373		21·64	0·21
1877	6,516	104	6,620	1,214	4	1,218		17·92	0·71
1878	4,558	96	4,654	824	9	833	17·99	0·39	
1879	1,628	60	1,688	273	5	278	15·69	0·12	
1880	1,982	50	2,032	286	2	288	15·95	0·12	
1881	8,551	120	8,671	1,417	14	1,431	16·61	0·62	
1882	1,799	55	1,854	260	3	263	12·96	0·11	
1883	598	28	626	93	...	93	16·06	0·03	
1884	6,363	204	6,567	940	3	943	15·98	0·31	
1885	6,146	198	6,344	1,052	3	1,055	15·8	0·35	
1886	99	33	132	22	2	24	14·28	0·01	
1887	56	3	59	3	...	3		0·00	
1888	62	5	67	8	...	8		0·00	
1889	5	...	5	..	...	...		...
1890	22	5	27	3	...	3		0·00	
1891	63	1	64	8	...	8	0·00		
1892	325	23	348	35	...	35	11·29	0·01	
Totals	57,362	1,057	58,419	9,901	47	9,948	17·1	...	
Average annual mortality per 1,000 of estimated population of London during the 19 years (1853 to 1870 inclusive) before the opening of the Managers' Hospitals, extracted from the Registrar-General's Returns								0·26	
Average annual mortality per 1,000 of estimated population of London during the past 19 years (1873 to 1892 inclusive), extracted from Registrar-General's Returns ...								0·15	
Increase ... ..								...
Decrease								0·11	

It will be observed that, comparing the mortality per 1,000 of the population in London from scarlet fever during the 13 years preceding the establishment of the Managers' hospitals with the mortality during the past 13 years, the latter shows an average decrease of 1·31.

The table on the opposite page is founded on the returns of the Registrar-General, and will be of interest to the Managers in relation to the history of smallpox in the Metropolis. It will be seen that the

actual mortality rates during the past seven years have been far lower than at any period dealt with in the Registrar-General's returns.

YEARS.	Estimated Population in the Middle of each Year.	DEATHS FROM SMALLPOX.		
		Annual Total.	Annual Rate per Million of Population.	Rate per Million on Averages of Five Years.
1838	1,766,169	3,817	2,161	—
1839	1,802,751	634	352	—
1840	1,840,091	1,235	671	—
1841	1,878,205	1,053	561	—
1842	1,917,108	360	188	787
1843	1,954,041	438	224	399
1844	2,033,816	1,804	887	506
1845	2,073,298	909	438	460
1846	2,113,535	257	122	372
1847	2,202,673	955	434	421
1848	2,244,837	1,620	722	521
1849	2,287,302	521	228	389
1850	2,330,054	499	214	344
1851	2,373,081	1,062	448	409
1852	2,416,367	1,159	480	418
1853	2,459,899	211	86	291
1854	2,503,662	694	277	301
1855	2,547,639	1,039	408	340
1856	2,591,815	531	205	291
1857	2,636,174	156	59	207
1858	2,680,700	242	90	208
1859	2,725,374	1,158	425	237
1860	2,770,181	898	324	221
1861	2,815,101	217	77	195
1862	2,860,117	366	128	209
1863	2,905,210	1,996	687	328
1864	2,950,361	547	185	280
1865	2,995,551	640	214	258
1866	3,040,761	1,391	457	334
1867	3,085,971	1,345	436	396
1868	3,131,160	597	191	297
1869	3,176,308	275	87	277
1870	3,221,394	973	302	295
1871	3,267,251	7,912	2,421	688
1872	3,319,736	1,786	537	708
1873	3,373,065	113	33	676
1874	3,427,250	57	16	661
1875	3,482,306	46	12	602
1876	3,538,246	736	207	161
1877	3,595,085	2,551	709	194
1878	3,652,837	1,417	387	266
1879	3,711,517	450	120	287
1880	3,771,139	471	124	309
1881	3,824,964	2,367	617	391
1882	3,862,876	430	110	271
1883	3,901,164	136	34	201
1884	3,939,832	1,236	307	228
1885	3,978,883	1,419	347	283
1886	4,018,321	24	5	160
1887	4,058,150	9	2	139
1888	4,098,374	9	2	132
1889	4,138,996	—	—	71
1890	4,180,021	4	1	2
1891	4,221,452	8	2	1.4
1892	4,263,294	41	10	3

VI.—IMBECILITY STATISTICS, 1892.

The Reports of the Medical Superintendents of the Asylums for Adult Imbeciles and of the Schools for Imbecile Children will be found on pp. 135 to 172.

The numerical results of the year's work at the several imbecile establishments are as under:—

	Asylums.			Schools.			Grand Totals.		
	Males.	Females	Total.	Males.	Females	Total.	Males.	Females	Total.
On the 1st January, 1892, the several Asylums and Schools contained	2,255	2,726	4,981	574	363	937	2,829	3,089	5,918
There were admitted during the year from the several Parishes and Unions (including re-admissions)	312	287	599	77	58	135	389	345	734
Transfers	11	31	42	...	...	...	11	31	42
The total number under treatment being	2,578	3,044	5,622	651	421	1,072	3,229	3,465	6,694
Of that number there were discharged	66	44	110	15	6	21	81	50	131
Transferred ... ..	...	...	...	11	31	42	11	31	42
And there died	246	249	495	21	15	36	267	264	531
Leaving under treatment on the 31st December, 1892	312	293	605	47	52	99	359	345	704
	2,266	2,751	5,017	604	369	973	2,870	3,120	5,990

The total number remaining under treatment in the asylums and schools at the end of 1892 showed an advance of 72 over the number at the end of 1891.

*Adult Imbeciles.—Statistics—Summary of Table I. (p. 136).—*This shows the total admissions, re-admissions, discharges, and deaths for the year at the three asylums for adults.

Of the total number of patients discharged, 30 had recovered, 24 had improved, and 54 had not improved. There were also 2 discharges entered as "Not insane."

The total number of patients who died was 495, as compared with 482 in 1891.

The average number daily resident in the three asylums was 4,915; the highest number resident on any one day was 5,045; and the lowest number was 4,823.

*Summary of Table II. (p. 136).—*This shows the admissions, re-admissions, discharges, transfers, and deaths which have taken place at the three asylums since the opening of the first in September, 1870, up to the end of 1892.

The total admissions during this period of over 22 years were 16,794, of whom 15,321 were admitted for the first time, 119 were

re-admissions, and 1,354 were transfers from one asylum to another. This latter number does not balance with the transfers shown amongst the discharges, as it includes a number of patients received from Hampstead Asylum when it was closed in 1876, as well as a number of children over 16 years of age received from the Imbecile Schools.

Of the discharges, 32 were not insane (as to 23 of these, see the explanation given in the third paragraph of the observations on Summary of Table I., p. 32 of the Report for 1891), 717 had recovered, 942 had improved, 906 had not improved, and 367 were transfers from one asylum to another.

The deaths numbered 8,813.

Summary of Table III. (pp. 137-8).—This shows the admissions, discharges, transfers, and deaths, with the mean annual mortality and proportion of recoveries per cent. of the admissions, for the year 1883, and for each subsequent year.

The total percentage of recoveries during the past year was 4·8, and the percentage of deaths on the average number daily resident was 10·0—a rate slightly higher than that for 1891.

Summaries of Tables IV. (p. 139) and V. (p. 140).—In the first of these Summaries is a classification, under the usual denominations of mental disease, of the mental condition of the patients admitted during the year 1892 direct from the several parishes and unions, and in the second Summary similar information is afforded as to all the patients resident in the several asylums on the last day of that year.

Of the total number of 5,017 then resident, 1,364 are classified as suffering from imbecility, 1,391 from dementia, 553 from dementia and epilepsy, 323 from imbecility and epilepsy, 302 from chronic mania, 245 from idiocy, 214 from senile dementia, and 184 from melancholia.

Summary of Table VI. (pp. 143-4) shows the history of the annual admissions since the opening of the asylums, with the discharges and deaths, and the numbers of each year's admissions remaining on the 31st December, 1892.

Of the 641 patients admitted during the year 1892, 11 had at the close of the year been discharged as recovered (including 1 not insane), 6 as improved, and 12 as not improved (including 1 not insane), and 35 had died.

Of the 4,997 patients remaining under treatment, upwards of 1,600 had been resident in the asylums over ten years.

Summary of Table VII. (pp. 147-150) shows the causes of death during the year 1892, together with the ages of the decedents, calculated from the ages stated in the orders of admission.

There were 495 deaths during the year, 25 having been caused by general debility and senile decay, 38 by phthisis, 33 by heart disease, 30 by general paresis, 147 by dementia, and 22 by epilepsy and convulsions. There was no death caused by zymotic disease or suicide.

Summary of Tables VIII. (p. 152).—This table shows the length of residence of those discharged as recovered and of those who have died during the year 1892.

Of the 495 deaths, no fewer than 82 were of patients who had been resident upwards of 18 years.

Summary of Tables IX. (pp. 151-2).—This table shows the age of patients resident in the several asylums on the 31st December, 1883, and on the same day in each subsequent year, calculated from the ages stated in the orders of admission.

Of the 5,017 patients remaining in the several asylums on the 31st December, 1892, upwards of 2,000 were over 50 years of age, six being over 90 years, and one above 100 years.

Summary of Table X. (p. 154).—This table shows the ages of the admissions, discharges, and deaths during the year 1892, calculated from the ages stated on the orders of admission.

The total discharges numbered 110, of whom 57 were between 15 and 30 years of age.

The total deaths numbered 495, of whom 370 were upwards of 40 years of age, and 145 upwards of 70 years.

Summary of Table XI. (pp. 155-6).—This table shows the departments where patients were employed on 31st December, 1892. 787 out of a total of 2,266 males, and 866 out of 2,751 females, were usefully employed in and about the asylums.

Summary of Table XII. (pp. 157-9).—This shows the occupations previous to admission, and condition as to marriage, of the patients admitted during the year 1892.

Of the 323 males admitted, 62 were described as labourers, 8 as porters, and 95 had no settled occupation; 126 were stated to be single, 78 married, 10 widowers, and as regards 109 the condition as to marriage was unknown.

Of the 318 females, 47 were servants, 15 needlewomen, 22 charwomen, and 200 were without settled occupations; 119 were stated to be single, 66 to be married, 11 widows, and in 122 cases the condition as to marriage was unknown.

Imbecile Children.—The statistics relating to the children and older patients under treatment at the Darent Schools and Pavilions will be found attached to the Report of the Medical Superintendent, Dr. Beach, pp. 164 to 172.

VII.—GENERAL SUMMARY.

In conclusion, the Committee submits the following brief summary of the numbers of Infectious Patients, Imbeciles (adult and children), and Boys who have been under the care of the Managers in the several Hospitals, Asylums, and Training Ship "Exmouth" since the opening of the first institution (the Temporary Hospital for Relapsing Fever at Hampstead) in 1870:—

INSTITUTIONS.	Admitted direct from Homes or Parishes and Unions.	Numbers remaining in the various Institutions, 31st Dec., 1892.
Fever Hospitals	79,289	3,548
Smallpox Hospitals	58,419	30
Asylums for Adult Imbeciles	*16,522	5,017
Schools for Imbecile Children	*2,135	973
Training Ship "Exmouth"	4,972	539
Totals	161,337	10,116

* Re-admissions are not included.

(Signed) JACKSON HUNT,
Chairman of the Committee,
 1893.

METROPOLITAN ASYLUMS BOARD,
 Chief Offices: Norfolk House, Norfolk Street,
 Strand, W.C.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF
THE SEVERAL INFECTIOUS HOSPITALS FOR
THE YEAR 1892.

No. 1.

REPORT OF DR. E. W. GOODALL, MEDICAL SUPERINTENDENT
OF THE EASTERN HOSPITAL

(For Statistics, see pp. 80 to 109.)

EASTERN HOSPITAL,
HOMERTON, N.E.,
March 3rd, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

I beg to submit my Annual Report and Statistical Tables for the year 1892.

On December 31st, 1891, there were remaining in the Hospital 322 patients. The admissions during 1892 numbered 4,003, giving a total of 4,325 patients treated in the course of the year.

The number of admissions, 4,003, is greater than during any previous year. As far as I can ascertain by reference to past reports of the Hospital the number of admissions that most nearly approaches last year's total was in the year February 1st, 1871, to January 31st, 1872, the first year of the Hospital's existence. During that year 3,589 cases, of which 3,319 were cases of Smallpox and 270 of "Fever," were admitted into both the Hospitals; for at that time the present Eastern Hospital comprised the Fever and Smallpox Hospital, the half that was then used for Smallpox being now devoted to Enteric Fever and Diphtheria. Of these 3,589 cases 2,125 Smallpox patients went into the Smallpox Hospital proper, while 1,194 Smallpox cases and 270 "Fever" cases were, at different periods of time, admitted into the Fever Hospital, which is at present entirely devoted to Scarlet Fever.

The largeness of the total number of admissions is almost entirely due

to the increase in the number of Scarlet Fever cases, of whom 2,955 were admitted during the year; the nearest approach to this number is 1,693 in 1890. Of the Scarlet Fever cases under treatment 225 died; and the mortality was 7.68 per cent. Amongst these 225 deaths are included 30 in which death was due, not to Scarlet Fever, but to some other disease, which was either present before or contracted after admission, viz. :—Diphtheria 15, Measles 8, Tuberculosis 5, Empyema 1, and the effects of severe burns 1. Making allowance for these cases the Scarlet Fever mortality is 6.6.

I append a detailed list of the cases of Diphtheria occurring in patients convalescent from Scarlet Fever :—

TABLE A.—Showing details of cases of Diphtheria arising in Scarlet Fever Convalescents.

No.	Initials.	Sex.	Age.	Ward.	Date of admission.	Attacked with Diphtheria.	Days after admission.	Result.	REMARKS
1	B. D.	F	13	Courage... ..	Nov. 21, 1891	Jan. 20, 1892...	60	Rec.	Faucial. Very slight.
2	E. D.	F	11	Courage... ..	Nov. 21, 1891	Jan. 17, 1892...	57	Rec.	Faucial. Sister of above.
3	J. M.	F	13	Patience ...	Feb. 12, 1892	Feb. 26, 1892...	14	Rec.	Faucial and Laryngeal.
4	S. L.	F	5	Fortitude ...	Feb. 24, 1892	Mar. 16, 1892...	21	Died	{ Faucial and Laryngeal. Broncho-pneumonia.
5	A. B.	F	3	Fortitude ...	Mar. 12, 1892	Mar. 20, 1892 .	8	Died	Faucial and Laryngeal.
6	M. R.	F	5	Hope	Mar. 22, 1892	April 15, 1892...	24	Died	Faucial and Laryngeal.
7	A. W.	M	6	Honor	June 2, 1892	June 7, 1892...	5	Rec.	Faucial.
8	H. R.	F	6	Truth	May 20, 1892	June 10, 1892...	21	Rec.	Faucial. Nephritis.
9	G. S.	M	4	Mercy	May 10, 1892	June 15, 1892...	36	Died	Faucial and Laryngeal.
10	E. C.	F	3	{ St. Patrick, Day Room... }	{ May 24, 1892	{ June 16, 1892...	{ 23	{ Died	{ Faucial and Laryngeal. Measles.
11	M. J.	F	2	{ Gladness, Day Room... }	{ June 5, 1892	{ June 19, 1892...	{ 14	{ Died	{ Faucial and Laryngeal. Measles.
12	R. W.	F	2	West Hut ...	June 6, 1892	July 23, 1892...	47	Died	{ Faucial. Paralysis of palate.
13	L. B.	F	6	{ Gladness, Day Room... }	{ May 13, 1892	{ July 7, 1892...	{ 45	{ Died	{ Faucial and Laryngeal. Measles.
14	A. M.	F	5	Temperance ...	July 16, 1892	Aug. 6, 1892...	21	Rec.	Faucial.
15	A. D.	M	$\frac{1}{2}$	Charity Hut...	July 25, 1892	Sept. 1, 1892...	38	Died	Faucial and Laryngeal.
16	M. S.	M	2	Courage... ..	July 11, 1892	Sept. 6, 1892...	57	Died	Faucial and Laryngeal.
17	E. G.	F	3	{ Temperance, Day Room... }	{ July 27, 1892	{ Sept. 18, 1892...	{ 53	{ Died	{ Faucial and Laryngeal. Measles.
18	L. H.	F	4	West Hut ...	Sept. 23, 1892	Oct. 15, 1892...	22	Rec.	{ Faucial. Paralysis of palate.
19	H. K.	M	4	{ Temperance, Day Room... }	{ Oct. 2, 1892	{ Oct. 22, 1892...	{ 20	{ Died	{ Faucial.
20	D. L.	F	$\frac{1}{2}$	{ Temperance, Day Room... }	{ Sept. 12, 1892	{ Oct. 28, 1892...	{ 46	{ Died	{ Faucial and Laryngeal Measles.
21	W. J.	M	2	{ Temperance, Day Room... }	{ Sept. 21, 1892	{ Oct. 29, 1892...	{ 38	{ Died	{ Faucial and Laryngeal. Measles.
22	F. J.	F	6	Temperance ...	Oct. 25, 1892	Nov. 20, 1892...	26	Rec.	Faucial and Laryngeal.
23	J. L.	M	2	Gladness ..	Oct. 19, 1892	Dec. 6, 1892...	48	Died	Faucial and Laryngeal.

NOTE.—In the six cases in which the attack of Diphtheria was complicated by Measles, the membrane was observed first at periods varying from two to seven days from the onset of the Measles.

A report such as this is hardly the place in which to discuss the etiology of post-scarlatinal Diphtheria, so I will only observe (i.) that cases occurred in all the wards and huts except two, one of the old wards and one of the new huts; (ii.) that case 5 was somewhat doubtful, no membrane was observed during life, and no *post-mortem* examination was allowed; (iii.) that both in cases 5 and 7 the patient may have been in the incubation-stage of the

disease when admitted ; and (iv.) that during the year there were admitted 55 patients suffering from Scarlet Fever complicated with a condition of the throat that could not clinically be distinguished from Diphtheria. This fact may aid in the elucidation of the question of the origin of post-scarlatinal Diphtheria. I must reserve, however, a fuller discussion of the subject for another time and place.

There were 600 cases of Diphtheria under treatment during the year, of whom 556 were new admissions, a larger number than in any previous year. There were 198 deaths, and the mortality was 35·67 per cent. Amongst the deaths are included two in which Measles was present on admission, and one in which the patient died in the ambulance while being conveyed to the Hospital.

There were 195 cases of Enteric Fever under treatment, of whom 157 were admitted during the year ; 21 patients died ; the mortality was 13 per cent.

Of the seven cases of Typhus Fever one was fatal ; and in that case the patient was the subject of chronic renal disease.

Of diseases other than "Fever" or Diphtheria 21 were remaining in the Hospital at the beginning of 1892 ; 328 were admitted during the year, 278 were discharged, and 48 died, giving a mortality of 14·67 per cent. The mortality per cent. of the zymotic diseases admitted into the Hospital was 12·18, the mortality per cent. for all diseases 12·39. On December 31st, 1892, 370 patients remained in the Hospital. Further particulars concerning the various diseases will be found in the Statistical Tables.

From the figures quoted above it will readily be understood that the year 1892 was an exceptionally busy one. Of the 16,118 Fever patients removed to the Managers' Hospitals nearly one quarter were admitted into the Eastern. It was observed in April that the number of Scarlet Fever admissions was rapidly increasing day by day. In May steps were taken to provide further accommodation by re-opening one of the old huts, and bringing into use for acute cases the day-rooms attached to the wards. During July two new huts were erected, and they were speedily full of patients. Room for acute cases continued to be found at the Eastern Hospital chiefly on account of the transference of a large number of convalescent patients to the Northern Hospital, so that when the latter Hospital was full the Eastern also had to close its doors ; and on the evening of September 5th it was impossible to admit any fresh cases of Scarlet Fever. Till the last week in November the Hospital continued to be quite full. It may be found interesting to know that the largest number of daily admissions was on September 21st, when 30 Scarlet, four Diphtheria, and two Enteric cases were admitted. The largest number of patients in the Hospital

at one time was 528 on the night of August 11th (398 Scarlet, 88 Diphtheria, two Typhus, and 40 Enteric); while the largest number of Scarlet Fever cases in the wards at the same time was 418 on September 16th. These figures are taken from the daily returns, and state the cases as they were certified.

I append a return showing the number of members of the staff warded on account of diseases presumably contracted in the performance of their duties; from this table it will be seen that one charge nurse, two assistant nurses, and six ward maids were attacked with Scarlet Fever. One of the ward maids had a severe attack, which was complicated with Nephritis. The charge nurse was still under treatment at the end of the year.

Two charge nurses, six assistant nurses, and one needle-room maid contracted Diphtheria. One of the assistant nurses had a severe attack.

Two charge nurses, one assistant nurse, one laundry maid, and one ward maid contracted Enteric Fever. In the case of one of the charge nurses the attack, I regret to say, proved fatal. The other charge nurse was still under treatment at the end of the year. The assistant nurse had a relapse. It is most probable that in her case the disease was contracted at a certain seaside town at which she had been staying, and where Enteric Fever was reported to have been prevalent.

One assistant nurse was attacked with Scarlet Fever and Diphtheria combined; she narrowly escaped with her life.

The remaining cases consist mostly of Acute Tonsillitis. One assistant nurse was still under treatment for this disease at the end of the year. A charge nurse who suffered from an axillary abscess, which was secondary to a poisoned finger, was also under treatment at the end of the year.

There were a number of cases of slight sore throat and of other minor ailments in which the member of the staff was not sufficiently ill to be warded.

The occurrence of so much illness amongst the staff may be accounted for in several ways: (i.) many of the staff had never been employed in Hospital work before, and were engaged on account of the increase in the amount of ward-work; (ii.) many of them were run down in general health on account of unavoidable overwork; (iii.) the wards were for several months full of acute or severe cases of Scarlet Fever, for it must be remembered that the large majority of the Scarlet Fever patients of over three years of age were transferred when convalescent to the Northern Hospital; (iv.) there was overcrowding in the dormitories, especially in those of the ward maids. The question of the sleeping accommodation for the staff is one, however, which you have under your consideration, and I have no doubt that in the future there will be no such difficulty with regard to this matter as there was during the summer and autumn of the year that has just passed.

The occurrence of several events of more or less interest has to be chronicled. In my opinion the most important were the measures undertaken with respect to the engagement of trained nurses. In February I was instructed by you to engage for the future only trained women as charge nurses; and, in order to obtain thoroughly competent women, the maximum salary was offered to those who held certificates of not less than three years training in a recognised Hospital or Infirmary. In September a similar measure was adopted in the case of assistant nurses, a sufficient number of whom there had been much difficulty in obtaining during the previous three or four months. The results of these measures have been most satisfactory.

The structural alterations in and additions to the Hospital buildings, which had been commenced in 1891, were completed during the following year; these included new stores, steward's offices, nurses' dormitories, and recreation-room. The latter were ready in August, and have been much appreciated by those who use them; but considerable delay was experienced in the opening of the stores, which were barely ready for occupation at the end of the year. The entrance gate and lodge were at the same time removed from the south-west corner of the Hospital grounds further eastwards along the Grove.

In the course of the year, under the superintendence of the Matron, every ward was stocked with a separate and adequate supply of linen, which was "marked" to the individual wards. This step has rendered it easy to keep a check upon the amount of linen and clothing in use throughout the Hospital.

The laying down of tar-paving in three of the airing-courts has been an improvement to the grounds from the points of view both of cleanliness and appearance.

In the spring of the year it had been decided to thoroughly clean, paint, and, where necessary, restore the wards and administrative buildings both inside and out; but the idea of carrying out works so extensive had to be abandoned on account of the large and rapid increase in the number of patients whom it was necessary to admit. During the year, however, it was contrived that the whole of the dormitories in the lower Hospital, together with all the mess-rooms, were both cleaned and painted. In December, when, with the aid of the North-Eastern Hospital, the daily number of admissions was much lessened, the painting of the wards was commenced, and four have been finished. The remainder, together with the administrative buildings, are now in the hands of the contractor.

In June the old dry-heat disinfecting apparatus and feather-disinfecting machine were replaced by a Lyon's steam disinfector.

It only remains for me to add that the extra work both in the wards

and the administrative departments that was entailed by the unusual number of cases under treatment was performed by all concerned, from highest to lowest, in a most ungrudging spirit. Especially would I mention all those nurses and assistant nurses who went on special or on ambulance duty. When it was feared that Cholera was about to visit the Metropolis, there was no lack of volunteers amongst the nurses here to go upon service in the removal of patients suffering from that disease ; indeed, two or three of these nurses were called upon to go, and did so willingly.

To my valued assistant medical officers, Messrs. Fox, Rogers, and Spurrell, I take this opportunity of offering my best thanks, not only for their help in the work of the Hospital, but also for their aid in the compilation of the Statistical Tables.

I have the honour to remain,

Ladies and Gentlemen,

Your Obedient Servant,

(Signed) E. W. GOODALL,
Medical Superintendent.

No. 2.

REPORT OF DR. R. A. BIRDWOOD, MEDICAL SUPERINTENDENT
OF THE NORTH-EASTERN HOSPITAL.

(For Statistics, see pp. 80 to 109.)

NORTH-EASTERN FEVER HOSPITAL,

ST. ANN'S ROAD, SOUTH TOTTENHAM,

7th February, 1893.

To the Committee of Management.

The building of this Hospital was commenced on the 23rd August, 1892, and it was ready for the reception of patients on the 8th October, 1892, or, in other words, its establishment and equipment and the provision of the necessary staff were accomplished in the short period of six weeks and four days.

On the day it was opened 55 patients were admitted.

The numbers in Hospital on the succeeding Saturdays were:—

15th October	201
22nd „	311
29th „	387
5th November	416
12th „	447
19th „	509
26th „	525

The largest number of patients in Hospital at midnight was on Tuesday, the 29th November; there were then 554. At the end of the year this had fallen to 390.

816 patients were admitted.

Nine of these were not suffering from Scarlet Fever.

397 were discharged.

Three of them left before they were free from infection—one on account of the dangerous illness of a near relative; another because of urgent private affairs; the third as her husband had returned from a long sea voyage shortly after her admission.

Twenty-nine patients died—27 of Scarlet Fever, one of a burn, and one of bronchitis.

The 807 Scarlet Fever patients were sent from the various parishes composing the districts in the following numbers :—

12	from the	Western,
388	„	Northern,
90	„	Central,
311	„	Eastern,
1	„	Southern,

and five from beyond the Metropolitan area.

The Hospital has been equipped with 733 beds for patients. The sites occupied are together a little over $17\frac{1}{2}$ acres. If the other available acre and a half is added to the Hospital, and if it be calculated that 40 Scarlet Fever patients can be treated on an acre, there would still be room for a couple or more huts, containing in all 33 beds. Such an addition of small wards to the Hospital would be convenient for the better isolation of patients requiring such treatment.

I am indebted to the Ambulance Nurses for valuable notes on the history of the patients' illness before removal from their homes. From these it appears that for 23 deaths the date of the onset of the illness was noted.

One died three days after the patient was first taken ill; three at the end of the first week; 11 during the second; three during the third; three during the fourth; and two during the fifth.

In 545 instances the Nurses recorded the dates of the initial illness and of the rash.

165 had the rash on the day the illness began; 218 had it on the day after; 93 had it two days after; and in 69 the interval between the earliest symptoms and the rash was more than two days. Or 30 in 100 had the rash on the first day; 40 in 100 on the second; 17 in 100 on the third; and 13 in 100 later.

In 732 instances the date of the appearance of the rash was observed.

113 of these patients were admitted on those dates; 156 on the day after; 128 two days after and 335 at a longer interval. Or 54 patients out of every 100 are admitted into Hospital in two or less days after the certain recognition of the disease.

It will be a source of gratification to the Managers that the editor of *The Weekly Herald*, of Tottenham, was able to state, in a leading article dated Friday, 3rd February, 1893 :—“ . . . while, at the same time, it was stated by the medical representative that no statistics could be ascertained to prove that, practically, a fever hospital impaired the health of its environs, however thickly populated. We have knowledge that, so far as the St. Ann's Hospital is concerned, since it has existed, this statement is absolutely borne out by facts.”

DEATHS.

No.	Initials.	Age.	Sex.	Parish.	Disease.	Complication.	Admission.	Death.	Initial Illness.	Rash.	REMARKS.
1	H. G.	5 years	M	St. George's-in-the-East	Scarlet Fever	... ..	10 Oct.	16 Oct.	{ Four weeks before Admission.		
2	D. F. G. H.	5 "	F	Hackney	Scarlet Fever	... ..	12 Oct.	18 Oct.	10 Oct.	11 Oct.	
3	J. T.	2½ "	M	Bethnal Green	Scarlet Fever	{ Edema of Larynx, Tracheotomy, 20 Oct. }	10 Oct.	21 Oct.	7 Oct.	8 Oct.	{ No rash on admission. Relapse 16 Oct. }
4	E. B.	14 "	F	St. George's-in-the-East	Scarlet Fever	Nephritis	22 Oct.	22 Oct.	8 Oct.	11 Oct.	
5	N. S.	19 months	F	Hackney	Scarlet Fever	... ..	22 Oct.	25 Oct.	...	19 Oct.	
6	C. G.	13 "	F	St. George's-in-the-East	Scarlet Fever	... ..	21 Oct.	28 Oct.	17 Oct.	18 Oct.	
7	E. A.	2 years	M	Stepney	Scarlet Fever	Broncho-Pneumonia ...	27 Oct.	29 Oct.	22 Oct.	25 Oct.	
8	L. H.	11 months	M	Whitechapel	Scarlet Fever	Bronchitis	26 Oct.	3 Nov.	24 Oct.	26 Oct.	
9	W. B.	2 years	F	St. Pancras	Scarlet Fever	{ Bronchitis, Otorrhoea, Cellulitis }	26 Oct.	5 Nov.	24 Oct.	25 Oct.	
10	H. D.	5 "	M	Mile End	Scarlet Fever	Pyæmia, Cellulitis ...	25 Oct.	7 Nov.	22 Oct.	25 Oct.	
11	H. L.	5 "	F	Stepney	Bronchitis ...	... ..	9 Nov.	10 Nov.	...	...
12	S. P.	2½ "	M	Whitechapel	Scarlet Fever	{ Nephritis, Rhinitis, Otitis, Pyæmia ... }	22 Oct.	14 Nov.	15 Oct.	19 Oct.	
13	C. R.	22 months	M	Bethnal Green	Scarlet Fever	... ..	14 Nov.	16 Nov.	9 Nov.	10 Nov.	
14	F. J.	3 years	F	Bethnal Green	Scarlet Fever	Cellulitis	12 Nov.	21 Nov.	12 Nov.	12 Nov.	{ Relapse 11 Nov. Desquamation at this date and since 3 Nov. }
15	C. G.	2 "	M	Bethnal Green	Scarlet Fever	Broncho-Pneumonia ...	28 Oct.	22 Nov.	27 Oct.	...	

16	W. P.	2 years	M	St. Pancras	Scarlet Fever	{ Broncho-Pneumonia, Albuminuria ... }	22 Oct.	26 Nov.	...	21 Oct.
17	R. L.	10 months	F	St. Pancras	Scarlet Fever	Pneumonia, Otorrhoea...	28 Oct.	1 Dec.	...	...
18	J. A.	11 years	M	Hackney	Scarlet Fever	... ..	3 Dec.	5 Dec.	2 Dec.	3 Dec.
19	L. C.	5 "	F	St. Pancras	Scarlet Fever	Albuminuria... ..	17 Nov.	9 Dec.	...	...
20	F. H.	3 "	F	St. Pancras	Scarlet Fever	Broncho-Pneumonia ...	8 Nov.	11 Dec.	2 Nov.	3 Nov.
21	F. E.	3½ "	F	Islington	Scarlet Fever	... ..	10 Dec.	14 Dec.	6 Dec.	6 Dec.
22	L. E.	8 "	F	Islington	Scarlet Fever	{ Suppression of Urine, Delirium ... }	14 Dec.	17 Dec.	10 Dec.	11 Dec.
23	A. A.	3 "	F	Islington	Scarlet Fever	... ..	14 Dec.	18 Dec.	10 Dec.	12 Dec.
24	D. C.	2 "	F	Islington	Scarlet Fever	{ Broncho-Pneumonia, Rhinorrhoea ... }	14 Dec.	23 Dec.	7 Dec.	8 Dec.
25	C. V. W.	6 "	M	Hackney	Scarlet Fever	{ Large Bed-sore on ad- mission, Paralysis all his life, Convulsions, Bronchitis ... }	23 Dec.	27 Dec.	9 Dec.	...
26	F. R.	5 "	F	Shoreditch	Burn	{ Bronchitis, Rash, Albuminuria ... }	24 Dec.	28 Dec.	...	...
27	R. S.	3 "	M	Poplar	Scarlet Fever	Broncho-Pneumonia ...	28 Dec.	29 Dec.	21 Dec.	21 Dec.
28	H. A.	6 "	F	Hackney	Scarlet Fever	{ Broncho-Pneumonia, Ulcer of Pharynx }	6 Dec.	29 Dec.	4 Dec.	6 Dec.
29	W. M.	15 months	M	Marylebone	Scarlet Fever	{ Laryngismus, Broncho-Pneumonia }	8 Nov.	29 Dec.	5 Nov.	7 Nov.

Date of burn, 20 Dec.

One patient died on the day of admission, two during the following day, 14 more during the first week, six during the second week, one during the third week, four during the fourth week, one during the fifth week. Total, 29.

RELAPSES.

No.	Initials.	Age.	Sex.	Parish.	Disease.	Complication.	Admission.	Discharged.	Death.	Initial illness.	Rash.	REMARKS.
1	J. T.	2½ years	M	Bethnal Green...	Scarlet Fever	{ Edema of Larynx, } { Tracheotomy, 20 Oct. }	10 Oct.	...	21 Oct.	7 Oct.	8 Oct.	{ No rash on admission. } { Rash 16 Oct. }
2	C. G.	2 "	M	Bethnal Green...	Scarlet Fever	Broncho-Pneumonia ...	28 Oct.	...	22 Nov.	27 Oct.	...	{ Relapse 11 Nov. Desquamating at that date and since 3 Nov. }
3	A. T.	13 "	F	Mile End ...	Scarlet Fever	... ..	19 Oct.	13 Dec.	...	...	17 Oct.	{ Relapse illness 3 Nov. } { Rash 4 Nov. }
4	E. A.	3 "	M	Hackney ...	Scarlet Fever	Chickenpox, 24 Nov. ...	15 Oct.	19 Dec.	...	14 Oct.	15 Oct.	{ No rash on admission. } { Relapse illness 23 Oct. }
5	S. P.	2 "	M	Islington ...	Scarlet Fever	... ..	19 Oct.	21 Dec.	...	...	...	{ No rash on admission. } { Rash 23 Oct. }
6	N. I.	5 "	M	Shoreditch ...	Scarlet Fever	Rheumatism ...	14 Oct.	31 Dec.	...	6 Oct.	10 Oct.	{ Two relapses of rash on 23 Oct. and 21 Nov. }
7	A. W.	6 "	F	Holborn ...	Scarlet Fever	Rheumatism ...	9 Oct.	31 Dec.	...	...	27 Sept.	{ Desquamating on admission. } { Rash 25 Oct. }

Two patients had a relapse during the first week of their stay in Hospital, three during the second week, and two during the third week.

One of these had a second relapse 38 days after admission, and 29 days after the first relapse.

The general health of the staff has been good. Nine of them suffered from Scarlet Fever; all made favourable recoveries.

I have the honour to be,

Your obedient Servant,

(Signed) R. A. BIRDWOOD,

Medical Superintendent.

No. 3.

REPORT OF DR. WILLIAM GAYTON, MEDICAL SUPERINTENDENT
OF THE NORTH-WESTERN HOSPITAL.

(For Statistics, see pp. 80 to 109.)

NORTH-WESTERN FEVER HOSPITAL,

January 17th, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

The report which I have now the honour of presenting to your notice is the record of an abundant year's work. For combined pressure on the resources of this Hospital and the success in meeting it, there is, indeed, no twelve months equal to that of 1892. In other previous years we have had to deal with epidemics of some severity, but at no prior time in the history of the Board have the number of applications for beds been in excess of the accommodation available. There were in the Hospital on the 19th of April 227 patients, thenceforth, however, the number began to rise. On May 19th there were 295, a month later there were 355; still the tale grew, till on September 24th it was 542, or nearly 150 in excess of the maximum of cases treated at any one time in the previous years. Suddenly, as it were, the necessity for coping with a tremendous emergency appeared; yet, still, without unseemly hurry or panic, the demands of the advancing tide of sickness were met. The review, therefore, of the campaign of last year may, as far as this Hospital is concerned, be one of complacency. If there were reason, however, to believe the exigency of 1892 altogether exceptional, it would be highly satisfactory, but for the most part there is small ground for the presumption that this outbreak is to be regarded as of a kind not likely to recur. With the compulsory Notification of Infectious Diseases Act in full operation, and its immense value admitted, recognised, and promulgated by the medical profession and public alike; with the ever-increasing confidence in and admiration of the Board's Hospitals, whereby a far greater number of persons attacked bethink themselves of having recourse to their hospitality and care, as compared with years past, as the admission thereto is now acquired without the introduction

of the relieving officer or any other appendage of the Poor Law machinery; and as London has grown to be in almost every respect the most wonderful city in the world, with an extent of metropolis so large and a population so immense,—the influx is more likely, nay, is certain, to increase with coming years than to diminish. When Scarlet Fever, therefore, again assumes an epidemic form, the same feeling of confidence in the available Hospitals will be accentuated, and that the barrier heretofore in operation will be replaced is a more than unlikely thing. Immunity secured from the spread of infection by honest expenditure and facility of acquisition has and always will meet with popular approval and support.

It is a matter of past history as to the manner in which the resources of this Institution became amplified, viz., by the erection of four huts on the northern portion of the grounds; and no scanty thanks are due for the rapidity and excellent manner in which these structures were constructed and equipped. As wards, I venture to think they leave little or nothing to be desired, and for appearance they are perhaps unsurpassed; cheerful and bright, well-ventilated, sufficiently warmed and lighted, they may well serve as models for the future.

During the year just ended 3,492 patients have come under treatment, of whom 2,670 were suffering from Scarlet Fever, 682 from Diphtheria, 97 from Enteric Fever, and 43 from “other diseases.” In the same period 151 died from Scarlet Fever, 138 from Diphtheria, 14 from Enteric Fever, and 15 from “other diseases.” 1,761 were also discharged to their own homes in the course of the twelve months, and 1,001 to the Northern and Gore Farm Convalescent Hospitals; and there remained on the night of the 31st December 412 in the Hospital. Thus the gross death-rate for 1892 is 10·17 per cent.

Of the Scarlet Fever there were 151 deaths, or a mortality of 6·37 per cent., including those subsequently complicated with Diphtheria, a full list of which is appended. Compared with former years, the incidence of Diphtheria as a sequela of Scarlet Fever is markedly less, but how or from what causes the improvement has arisen no trustworthy evidence of value is forthcoming.

*Cases of Diphtheria occurring in 1892 amongst Patients convalescent from
Scarlet Fever.*

Date of Attack.	Name.	Age.	Time after Admission.	Nature of Attack	Result.	Ward.
1892.						
January 5th ...	V. H.	4	5 weeks...	Laryngeal	Recovered	5A
January 11th ...	F. B.	6	4 ,, ...	Laryngeal	Recovered	5A
February 8th ...	F. H.	4	11 ,, ...	Faucial	Recovered	2
March 12th ...	E. S.	7	3 ,, ...	Faucial	Recovered	4A
April 30th ...	J. T.	7	9 days ..	Faucial	Recovered	7
May 9th	A. S.	7	6 weeks...	Faucial	Recovered	1
May 23rd	A. R.	9	4 ,, ...	Laryngeal... ..	Died ...	5A
May 25th	R. M.	16	4 ,, ...	Faucial	Recovered	5A
June 1st	M. L.	12	3 ,, ...	Faucial	Recovered	5A
August 3rd ...	J. A. D.	3	3 ,, ...	Laryngeal and Faucial ...	Died ...	5A
August 19th ...	A. S.	11	3 ,, ...	Faucial	Recovered	1
September 24th	H. D.	3	25 days ..	Laryngeal and Faucial ...	Died ...	6
September 26th	M. E.	5	4 weeks...	Laryngeal and Faucial ...	Died ...	5A
October 12th ...	M. F.	6	3 ,, ...	Laryngeal and Faucial ...	Died ...	6
October 15th ...	F. N.	13	6 ,, ...	Faucial	Recovered	7A
November 14th	E. O.	12	5 ,, ...	Faucial	Recovered	2
November 17th	B. O.	7	16 days ..	Faucial and Nasal ...	Recovered	6A
November 29th	A. W.	12	15 ,, ...	Faucial	Recovered	6A
November 30th	W. N.	3	4 weeks...	Faucial	Recovered	3
December 7th	J. G.	5	4 ,, ...	Faucial	Recovered	4A
December 14th	E. S.	24	16 days ..	Faucial	Recovered	6A
December 18th	W. T.	3	4 weeks...	Faucial and Nasal ...	Died ...	2
December 20th	G. W.	6	10 ,, ...	Faucial and Laryngeal ...	Recovered	8
December 21st...	H. P.	9	7 ,, ...	Faucial	Died ...	9A
December 23rd	H. S.	3	3 ,, ...	Faucial and Laryngeal ...	Died ...	2

Recovered	...	...	...	17
Died	...	...	...	8
Total	...	...	...	25

The relative death-rate of the undermentioned diseases is as follows, as calculated by the recognised formula:—

Diphtheria (with 21 successful tracheotomies)	21·83 per cent.
Enteric Fever	16·86 „
Other diseases	35·71 „

The consideration of the general and special death-rates of any given hospital is of importance in more senses than one; but when calculated on the mere quantity—apart from the quality—of each particular hospital practice, they are utterly inadmissible, inasmuch as it must be assumed that all the compared hospitals receive cases of equal gravity and danger of life, but this assumption would be grossly inconsistent with facts, the quality of cases received in them for treatment differing not in a trifling degree, but enormously from one another. Caution must therefore be exercised when the object is to use special death-rates for gauging hospital non-success in relation to particular kinds of disease. That caution, however, having been duly observed, such death-rates may become of the utmost value, for in their perfection they are true measures of medical non-success, and may be made instrumental both to advance professional science and also to enlighten the public mind as to the respective merits of hospitals.

In illustration, it has been pointed out from time to time that the mortality in the Metropolitan Fever Hospitals is higher than in the homes of those attacked by special febrile disease. This probably is true; but the observations and the facts brought under your notice fortnight after fortnight as to the large number of fatalities occurring within a few hours after admission have not received as yet a similar prominent attention. Thus, in the course of the past year no less than 18 Scarlet Fever patients and 36 suffering from Diphtheria passed away in periods varying from two to 30 hours after their arrival, which, subtracted, would reduce the mortality to 5·63 per cent. and 16·61 per cent. respectively. The conclusion forced upon us is, and the inference must necessarily be, that either sufficient care is not always exercised in regard to the condition of cases for removal, or that the transfer is sometimes postponed until the state of the patient is hopeless. As regards the latter, it is by no means an isolated circumstance to receive a child with a report from the ambulance nurse that the medical man from whose care it has come is of opinion that tracheotomy is imperatively required, which, being done *in extremis*, goes, as a rule, to add to the already too many failures attendant upon the operation. That these unfortunate events will continue to recur is undoubtedly certain; nevertheless, they render the death-rates, calculated on mere numbers of so-called patients, utterly worthless as measures of hospital non-success.

Diphtheria—which, as an epidemic, was previously almost unknown to

the present generation of medical practitioners—has now become a fruitful source of sickness and death, giving for England and Wales an annual total number of 5,000 and 6,000, as opposed to some 2,000 to 3,000 twenty years ago. In the third quarter of last year the deaths attributed to this cause were 487, and in the 32 chief provincial towns, 229. In the corresponding period of the preceding year, the numbers were 330 in London and 124 in the provincial towns. In the fourth quarter of 1891, the numbers were 365 and 176 respectively; in the first quarter of 1891, 328 and 189; and in the second quarter, 437 and 188; while the last quarter of 1892 showed 683 and 309, as compared with that of 1891, attaining in one week the highest number, 60, on record as occurring in London since registration began. That this steady increase should continue concurrently with such advanced and efficient sanitary administration is a matter of great importance, and affords a scientific problem urgently demanding some reasonable solution. From this class of disease no inconsiderable number of our patients has been furnished during the past year, with a proportionate high mortality. At present we have no known power of dealing preventively with Diphtheria, except in checking all communication between the sick and the healthy members of the population. The difficulty, however, of the task is self-evident, and if it is not readily recognised by the well-to-do portions of the community, how can those in the poorer and more crowded dwellings of the working classes be expected to adopt a means which is alone known to give protection from an attack of so grave a malady? And while the disease is eminently one which we should wish to prevent, so we could desire to find remedies which would always, or nearly always, cure. We, however, appear to be indeed distant from so desirable an end. The value of tracheotomy in Laryngeal Diphtheria, either as a primary or secondary affection, so far as this Hospital is concerned, up to within the last year or two, was an unknown quantity. Latterly, however, the successes have become very marked, and afford a solid foundation for congratulation and encouragement. Thus, taking the last 12 months, 58 patients were subjected to the operation, with 25, or 42·93 per cent., recoveries. Bearing in mind the before-mentioned fact, that not a few of these were admitted in an absolutely moribund condition, the results indicate conscientious watchfulness and zealous care on the part of the nurses attached to the Hospital. Even in the houses of the rich, where all the advantages of a separate room and nurses can be had, the effects obtained by tracheotomy are but too frequently most disappointing. Until August, 1891, it will be remembered that 44 beds only were provided in this Hospital for Diphtheria; but the number of cases increasing after that time, arrangements were made for setting apart another ward—an additional 22 beds. In the summer of last year we were again called upon

for extra accommodation for this class of disease, making the total 88—a number that I maintain should not be exceeded for the following among many other reasons:—(a) On account of Diphtheria patients requiring so large an amount of care and attention that practically a couple of dozen of severe cases demand the almost undivided attention of one medical officer; (b) the mental strain arising from the care of many such patients becomes so intensified as to be almost unendurable; and (c) because the aggregation of persons suffering from so malignant a disorder, if unduly increased, becomes, in my opinion, an important factor in determining an unfavourable result to a very appreciable degree. To the theory of aërial transmission to other wards I am not, however, a convert, no unequivocal evidence of this having as yet come under my observation.

In the early part of the year a considerable number of cases of Measles were seen among the Scarlet Fever patients, resulting in a somewhat heavy death-rate. This affection, being so exceedingly contagious and difficult to isolate, always produces much anxiety, and calls for the most rigid quarantine to prevent it culminating in an epidemic; but here the modern pavilion system of hospital construction comes materially to our assistance, a plan that must more and more commend itself to the approval of the practical administrator.

Three cases of Smallpox were also introduced into the wards while in the latent or incubative stage. Being diagnosed, promptly removed, and the whole of the inmates revaccinated, no untoward results followed, affording another, among the already overwhelming existing proofs, that almost perfect, absolute, certain, and complete protection may be secured by a simple operation, all statements to the contrary notwithstanding.

With the very large number of patients under treatment at one time, it follows that the difficulties experienced in providing accommodation here for the nursing and other staff were much augmented, and had it not been for your readiness to give up the whole of Bartram House and facilities afforded for making use of the until then empty and practically condemned “Limes,” more buildings of a temporary character must have been added to the existing ones. In view of the fact that the new administrative block is now within a measurable distance of completion, it is a matter for congratulation that such a proceeding was obviated. The task, however, was by no means an easy one to overcome the objections—very reasonable ones, it must be admitted—to the scant comfort afforded and rough surroundings with which many of the nurses had to content themselves, and reflects no small credit on the self-abnegation displayed by the majority and their readiness to co-operate in a time of urgency and trial.

No abnormal amount of sickness has shown itself amongst those

employed here during the past year. A certain number of new arrivals were attacked by Scarlet Fever, as must always be the case when the unprotected are hurriedly pressed into the service. Ten contracted Diphtheria, but of these four only were connected with the wards to which such cases are allocated. One Nurse also was affected by Enteric Fever, undoubtedly contracted in the discharge of her duties, the first since my connection with the Hospital. No death, I am glad to say, occurred in the staff.

The want of increased isolation accommodation becomes more and more apparent as each year rolls by. Cases of mistaken diagnosis will undoubtedly occasionally occur, however high the standard of medical education is reached, and provision for such is therefore an imperative requirement. With, however, the inevitable changes now close at hand, the question will then with convenience be introduced for your consideration.

I cannot close this report without recognising the cordial assistance and willing participation at all times so loyally rendered by the staff and officers. With but a solitary exception here and there, the disposition exhibited has been one of interest in the work; the duties, being performed without fear or favour, have produced a result which, doubtless, is gratifying to the Committee of Management of this Institution, to whose kindness, courtesy, and attention to minor points of detail one and all are indebted.

Words fail me to express the value of the services afforded during the past year of unqualified hard work by my colleagues, Drs. Winter and Hughes; they have not only been efficient, but their whole aim and end have been to render the results satisfactory.

From you, Ladies and Gentlemen, I have continued to receive the same uniform consideration and support as in former years. For these permit me to tender most grateful thanks, as my duties, in consequence, have been rendered of a uniformly pleasant character.

I append the usual statistical tables, for the compilation of which I am indebted to Dr. Winter.

I am, Ladies and Gentlemen,

Your obedient Servant,

(Signed) WM. GAYTON,
Medical Superintendent.

No. 4.

REPORT OF DR. R. M. BRUCE, MEDICAL SUPERINTENDENT OF THE
WESTERN HOSPITAL.

(For Statistics, see pp. 80 to 109.)

WESTERN HOSPITAL,
FULHAM, S.W.
March, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

I beg to present my Annual Report for 1892.

During the year, 2,436 cases came under treatment, an increase of nearly 50 per cent. on the number treated in 1891. The admissions numbered 2,287; the discharges, including transfers, 1,912; and the deaths 196. 317 remained in the Hospital at the end of the year.

Of the total admissions, 1,900, or rather more than four-fifths, were cases of Scarlet Fever, 247 were cases of Diphtheria, 38 were cases of Enteric Fever, three were cases of Typhus, and 99 suffered from other diseases.

Seventy-three per cent. of the total discharges were transferred to the Convalescent Hospitals of the Board.

The total percentage mortality was 8·92, made up as follows:—

Scarlet Fever, 5·71 per cent., including 12 deaths from Diphtheria contracted during convalescence; Enteric Fever, 4·81 per cent.; Diphtheria, 32·09 per cent.; Typhus, nil; other diseases, 13·13 per cent.

The relation of age to the mortality in Scarlet Fever, calculated on the admissions, shows that the percentage death-rate in children under five years of age was 15·5, whilst in respect of all ages above five taken together it was 1·79.

In addition to the more common complications of Scarlet Fever, Diphtheritic symptoms supervened in 23 cases. Five presented membrane on the fauces when admitted, of which one died, and one had Paralysis afterwards, and 18, or 1·03 per cent., of the completed cases contracted

Diphtheria during convalescence, as compared with 1·2 per cent. in 1891, and 3·2 per cent. in 1890. A list of these cases is submitted herewith.

Initials.	Age.	Sex.	Ward.	Admitted.	Contracted Diphtheria.	Days after admission.	Result.	REMARKS.
N. C.	4	F	4	December 5th, 1891	January 10th ...	36	D	Measles Jan. 5th, Pericarditis, Laryngeal Diphtheria.
A. W.	6	F	2	January 3rd, 1892...	„ 12th ...	9	R	Faucial.
A. D.	6	M	10	December 28th, 1891	February 10th	44	D	Laryngeal.
W. L.	4	M	10	January 18th, 1892	„ 12th	25	R	Faucial and Nasal.
G. C.	6	M	10	March 29th, „	April 10th ...	12	D	Laryngeal.
R. C.	3	F	2	April 25th „	May 5th ...	10	D	Faucial and Nasal.
W. C.	10	M	10	May 2nd „	„ 27th ...	25	R	Faucial.
P. T.	5	M	10	„ 3rd „	„ 27th ...	24	R	Faucial.
B. C.	5	F	3	April 11th „	June 15th ...	65	R	Faucial.
H. H.	4	M	9	May 28th „	„ 16th ...	19	D	Faucial and Laryngeal
W. R.	1 $\frac{3}{4}$	M	14	July 21st „	August 12th ...	22	D	Laryngeal.
N. B.	2	M	2	August 26th „	October 16th ...	51	D	Laryngeal.
P. L.	1	M	2	October 1st „	November 10th	40	D	Laryngeal.
C. S.	4	M	11	„ 24th „	„ 14th	21	D	Laryngeal.
E. H.	1 $\frac{1}{2}$	F	13	September 6th „	„ 25th	80	D	Faucial.
E. O.	12	F	12	August 7th „	„ 21st	106	R	Faucial.
E. H.	7	M	9	November 12th „	December 4th	22	D	Faucial and Nasal.
P. T.	3	M	13	„ 8th „	„ 9th	31	D	Faucial and Laryngeal.

Nineteen cases developed Measles, and four deaths were due to this disease. Eleven cases were complicated with Whooping Cough, which was non-fatal, and two with Rötheln.

The Enteric Fever admissions were fewer than usual, only seven patients coming under treatment during the first six months of the year, and the cases were of a mild type. The occurrence of relapse was noted in eight instances.

The Diphtheria admissions were 117 in excess of those in 1891. The females exceeded the males at every age-period above one year, and the mortality was also slightly higher in the female sex. Sixty-four per cent. of the deaths occurred in children under five years of age.

Paralysis in one form or other supervened in 15·2 per cent.

From Table IX., which gives details of the miscellaneous diseases, it will be seen that of 28 cases certified as Scarlet Fever, 16 were found to have Rötheln and nine Measles; and of 49 cases certified as Diphtheria, 43 had Tonsillitis.

Three patients, members of the same family, certified as Enteric Fever, were found on admission to be suffering from Typhus.

During the year, 67 officers were warded for illness. Of these, 26

suffered from infectious disease. Sixteen contracted Scarlet Fever, viz., one Assistant Medical Officer, one nurse, seven assistant-nurses, six ward-servants, and one needlewoman. Six contracted Diphtheria, viz., one clinical assistant, two nurses, two assistant-nurses, and one ward-servant. Three contracted Enteric Fever, viz., two nurses and one assistant-nurse, and two assistant-nurses contracted Measles. All recovered.

In consequence of the early increase in the number of admissions, it was found necessary in July to erect six temporary wooden huts on the recently-acquired land adjoining the south side of the Hospital. Four of these huts were built in less than three weeks, the remaining two being erected in August. In this way, the accommodation of the Hospital was increased by 158 beds. Cubicles were provided for the extra staff of servants required, and the Hospital laundry was augmented by the erection of a supplementary one and the conversion of a small ward into a mangling and sorting room.

The new administrative buildings were completed during the spring, and these, as well as the old block, have since been painted and distempered throughout.

Further necessary improvements have been effected by the laying down of tar-paving in the airing court between Wards 9 and 10 and of granite cubing in the roadway in front of the entrance gates and receiving rooms.

I am, Ladies and Gentlemen,

Your obedient Servant,

(Signed) R. M. BRUCE.

Medical Superintendent.

No. 5.

REPORT OF DR. F. F. CAIGER, MEDICAL SUPERINTENDENT OF
THE SOUTH-WESTERN HOSPITAL.

(For Statistics, see pp. 80 to 109.)

SOUTH-WESTERN HOSPITAL,

LANDOR ROAD, STOCKWELL, S.W.,

March 15th, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

I beg to present my Annual Report for the year 1892.

As has been the case in the other Hospitals under your control, the work of this Institution has shown a very great increase during the past year.

The admissions numbered 2,750, which is more than double the number admitted in 1891, which, with the 273 cases remaining in Hospital at the end of last year, brings the total number treated during 1892 up to 3,023.

Of these 1,126 were transferred to the Convalescent Hospitals and 234 died, leaving 345 under treatment on the 31st December, 1892.

The general death-rate was therefore 8·62.

The Scarlet Fever cases treated during the year numbered 2,850, of which 1,976 were discharged, including 1,116 transferred to the Convalescent Hospitals, 267 remained under treatment at the end of the year, and 107 died.

The Scarlet Fever mortality was therefore 5·05.

The Diphtheria cases treated during the year numbered 463, of which 303 were discharged, 10 transferred, 57 remained under treatment, and 93 died.

The Diphtheria mortality was therefore 22·5.

The Enteric Fever cases treated during the year numbered 117. Eighty-two of these were discharged, 20 remained under treatment, and 15 died.

The Enteric Fever mortality was therefore 15·9.

The cases of "other diseases" treated during the year numbered 90. Of these 71 were discharged, one remained under treatment, and 18 died.

The "other disease" mortality was therefore 20·3.

Of the 2,750 admissions during the year 116 were wrongly certified, and of these 20 developed the disease as certified after admission.

The paramount importance of having an ample number of isolation beds in every Fever Hospital cannot be too strongly or too often insisted upon, in face of facts such as these. Patients suffering from some other definite form of disease can be easily disposed of. If no isolation beds remain unoccupied, it is better, in the interest of the patient himself, that he should be sent home again, rather than be subjected, or, if himself suffering from another contagious affection, subject others, to the risk of contracting a second and possibly fatal disorder. It is the simply negative cases which are the difficulty—cases which, however certain one may feel about them in one's own mind, cannot be lightly returned, as their rejection may involve serious consequences, not only to the man returning them, but also to the private practitioner and to the patient's own friends.

If such a case be admitted to the general ward and harm accrue, it is true that the medical man originally certifying must bear the legal responsibility, but at the same time considerable moral responsibility must rest with the Medical Officer at the Hospital, who, as a skilled and responsible official, is entrusted with the allocation of all cases sent up for admission. As the result of some years' experience in dealing with infectious disease, I hold strongly to the opinion that in every Fever Hospital there should be at least one bed in every fifteen reserved for isolation purposes. It is possible that in years to come, when the beneficial effect of practical instruction to students in the diagnosis of infectious disease has had time to make itself felt, that this proportion may be reduced; but the necessity for providing considerable means of isolation will always exist, if only in view of the fact that two or more infectious diseases are often co-existent in the same individual, to say nothing of the inexactness of medical science.

I regret to state that the immunity from Secondary Diphtheria amongst the Scarlet Fever convalescents which has hitherto prevailed in this Hospital has not been maintained, for during the year 18 cases have appeared, of which four died. The circumstances under which this serious complication has developed are very striking, and are well worthy of attention.

During the early summer, at a time when there was great stress on the Managers' accommodation owing to the prevalence of Scarlet Fever, I, for the first time, treated 24 patients in a ward which had previously contained 18, although this ward was constructed originally for 24 beds. The floor-space per bed was consequently reduced from 144 square feet, which I regard

as the minimum allowable for such cases, to 105 square feet, which the Architect, in the case of this block alone, for reasons best known to himself, considered sufficient. Within three weeks from the time of the change, no less than seven cases of Diphtheria and three cases of other throat illness appeared in that ward for the first time in its history—at any rate, since the Hospital was re-opened in 1889. I therefore on the 22nd of June removed the six extra beds from the ward, thereby reducing the number of patients again to 18, and increasing the floor-space per bed to 144 square feet. At your next meeting I reported to you the action I had taken, which I am glad to say met with your approval. From that date up till the time of writing, a period of nearly nine months, no fresh case has appeared in that ward. Of the other 11 cases, six arose in wooden huts, of which the allowance per bed of floor-space was only 100 square feet. This was the first occasion since 1889, from which time my knowledge of the Hospital dates, that these huts have continuously contained the number of beds for which they were originally constructed, as I have always considered them unfit for the treatment of the corresponding number of patients. Owing to the continued prevalence of the epidemic, however, it became necessary for a time to receive the full number. Since November last, the prevalence having diminished, the number of patients received into these huts has been gradually lessened, and up to the present time, an interval of four months, only one case has arisen. The remaining five cases occurred in two wards at different intervals spread out in the course of the year.

To sum up the facts associated with the appearance of 19 cases of Secondary Diphtheria in Scarlet Fever convalescents from the time of the opening of this Hospital in October, 1889, until the end of 1892, it will be seen that no less than 13 cases appeared in rather under 7 months in 3 wards deficient in floor-space per bed, whereas only 6 cases appeared during 44 months in 12 wards which had a sufficient allowance of floor-space per bed.

Although it is doubtless true that other factors are concerned in the development of Post-Scarlatinal Diphtheria in some hospitals, yet, having regard to the long immunity which we have enjoyed, it would seem that such influences are not to any extent operative in this Hospital; but that here its incidence has closely followed in the wake of the temporary over-crowding of otherwise healthy wards.

In view of the increasing prevalence of Scarlet Fever in the month of June, you determined to increase the accommodation of the Hospital, as a temporary measure, by the addition of 50 beds, bringing the total accommodation up to 400. Twenty of these beds were provided for by the construction of a new hut, built of wood and iron, in the female airing court of the Upper

Hospital. This was opened for the reception of patients on July 20th, and on the following day contained its full complement. The remaining 30 beds were provided by the reconversion to ward purposes of a temporary wooden hut erected in the autumn of 1887. As this structure, since 1890, has been utilised as a staff dormitory by the construction of cubicles, it was necessary to provide sleeping accommodation elsewhere for the laundry-maids and wardservants inhabiting it. This difficulty was met by the erection of a new hut, built also of wood, covered with iron, in the female airing court of the Lower Hospital, thereby still more reducing the recreation space available for patients.

The increased number of the staff in connection with the augmentation of the Hospital accommodation necessitated still more overcrowding of previously overcrowded dormitories, and every available room was requisitioned which could by any means be utilised for sleeping purposes—some of them most unsuitable for that object. The increase in the staff accommodation which you have recently sanctioned, and which will be commenced shortly, will, to a great extent, remove this congestion.

The overcrowding in the small and widely-separated mess-rooms still remains.

The administrative department on which the stress of 1892 has been most felt is the laundry. This deficiency in the matter of the laundry provision has also been shared by the other older Hospitals of the Board, in most of which measures are being, or have lately been, taken to remedy the defect.

Since last July it has been only by the employment of night labour in the laundry that the requirements of the Institution have been met, and this, I feel, but inadequately. In this connection, I desire to point out the desirability of centralising the heating power of these Hospitals. The fact that the boilers are so multiplied and scattered about the Institution, thereby necessitating the employment of more labour and more fuel, and the fact that most of them have been in use over twenty years, are cogent reasons for such action on the part of the Committee, and moreover suggests the prudence of such a course being adopted before they are quite worn out, signs of which in several of them have been lately apparent.

I will not further allude to the desirability of rectifying the administrative disabilities under which this double Hospital labours, as the subject is one upon which I am about to report to you more fully, in compliance with your instructions. I may say shortly, that what is most acutely indicated is the need for more centralisation in nearly all the administrative departments.

Your determination to tar-pave the two airing courts of the Lower

Hospital was a wise one, and most desirable from every point of view. One of them was completed, but the work of laying the other had to be deferred in consequence of the erection of the temporary staff hut in its midst.

The old fence and footpath in the Landor Road still remain in the same dilapidated condition. The appearance of the Hospital premises from this aspect is hardly in accord with that characterising the other Institutions under the Managers' control.

To the memory of my old friend and colleague, Mr. William Frost, who died in harness on September 17th from Cerebral Disease, I can only allude in terms of the greatest regret, coupled with the most sincere respect. His 22 years' faithful service were recognised by the Committee in recommending him for the pension which unfortunately he did not live to enjoy. After his death, I continued, with the able assistance of Mr. Cloake, the Steward's clerk, to fulfil the duties of his office until the appointment of Mr. Samuel Crick as Steward in December.

During the year 12 members of the staff contracted Scarlet Fever, 12 Diphtheria, 4 Enteric, 21 Influenza, and 50 some other form of throat affection. With the exception of Alice Stammers, an assistant-nurse, who died of Enteric Fever, and Matilda Ingram, an assistant-nurse of exceptional value and promise, who succumbed to a most malignant attack of Diphtheria, all recovered. When the staff accommodation is improved, I trust there will be a greater immunity from illness than has been the case during the past year.

I herewith submit the Statistical Tables, and beg to remain,

Ladies and Gentlemen,

Your obedient Servant,

(Signed) FRED. FOORD CAIGER,

Medical Superintendent.

No. 6.

REPORT OF DR. JOHN MACCOMBIE, MEDICAL SUPERINTENDENT
OF THE SOUTH-EASTERN HOSPITAL.

(For Statistics, see pp. 80 to 109.)

SOUTH-EASTERN HOSPITAL,
NEW CROSS, S.E.,

April, 1893.

To the Committee of Management.

MADAM AND GENTLEMEN,

I beg to present my Annual Report for the year 1892, with statistical tables.

The work throughout the year was exceptionally heavy, no less than 3,557 having been treated during the twelve months. This was owing to the prevalence of Scarlet Fever, 2,892 cases of that disease having been admitted.

Of the total cases treated, 3,090 were cases of Scarlet Fever; 148 were cases of Diphtheria; 138 were cases of Enteric Fever; nine were cases of Typhus, and 172 were cases of miscellaneous diseases.

The type of the Scarlet Fever outbreak was not a severe one, the mortality, after deducting cases that died of superadded Measles (17 cases) and Diphtheria (11 cases), being 4·6 per cent. 2,111, that is, two-thirds of the Scarlet Fever cases, were transferred to the Convalescent Hospitals.

The Diphtheria cases, on the other hand, were of an exceptionally severe type, and the mortality was consequently high, viz., 56·60 per cent.; 26 of the cases (*i.e.*, one-third of the deaths) died within 48 hours of admission.

Tracheotomy was performed on 22 cases, and of these four recovered; and intubation on 21 cases, of whom four recovered.

There were 15 cases of Post-Scarlatinal Diphtheria, and of these I herewith give tabular particulars:—

Initials.	Sex.	Age.	Date of Admission.	Disease.	Complication.	Date of onset of complication.	No. of days after admission	Ward.	Result.
M. B.	M	3	March 9th	Sc.	Diphtheria	March 26th	17	10	D
R. C.	F	4	„ 28th	Sc.	Morbilli, Otorrhœa, Vags., Diphtheria	June 22nd	86	Isoln.	D
A. H.	F	5	April 5th...	Sc.	Morbilli, Diphtheria	May 12th...	37	„	D
T. B.	M	3	„ 29th	Sc.	Diphtheria	„ 11th...	12	12	D
A. M.	F	21	May 2nd ...	Sc.	Albuminuria, Diphtheria	„ 14th...	12	8	R
M. T.	F	6	June 7th ...	Sc.	Cellulitis, Diphtheria	July 1st ...	24	1	D
E. E.	F	2	„ 30th	Sc.	Diphtheria	„ 29th...	29	10	D
D. C.	F	5	July 4th ...	Sc.	Vaginitis, Albuminuria, Diphtheria...	Aug. 3rd ...	30	12	R
W. C.	M	4	August 5th	Sc.	Albuminuria, Rhinitis, Diphtheria ...	Sept. 1st ...	27	Hut	D
M. S.	F	8	„ 30th	Sc.	Pertussis (on admission), Diphtheria	„ 13th	14	12	D
W. J. B.	M	3	Sept. 2nd	Sc.	Rt. Otorrhœa, Diphtheria	Oct. 24th...	52	3	D
L. H.	F	5	Oct. 27th...	Sc.	Albuminuria, Diphtheria	Nov. 26th	30	12	R
E. D.	M	14	Nov. 2nd...	Sc.	Diphtheria	„ 19th	17	3	R
V. M. H.	F	9	„ 27th	Sc.	Lt. Otorrhœa, Diphtheria	Dec. 15th...	18	12	R
W. C.	M	10	Dec. 2nd ...	Sc.	Diphtheria	„ 24th...	22	3	D

The mortality of the Enteric cases was 13·33 per cent., which may be regarded as a low death-rate.

All the Typhus cases recovered.

Eight officers contracted Scarlet Fever, all of whom recovered. Having regard to the very large number of Scarlet Fever patients treated, and the large number of staff, the proportion of cases of Scarlet Fever among the officers appears to me to be a small one.

Two contracted Diphtheria, one of whom recovered and the other was under treatment at the end of the year.

Thirty-one officers suffered Tonsillitis, and 14 from Influenza.

One of the porters died of Heart Disease.

In other respects the health of the officers was good.

Owing to the pressure of Scarlet Fever, it was necessary to reduce the Enteric Fever accommodation by placing the Enteric cases in the Typhus wards (16 beds), and utilising the Enteric wards for Scarlet Fever. I hope that it will not be necessary to continue this arrangement. A hut of a temporary character was erected for Scarlet Fever cases. It answered the purpose pretty well, but it was found necessary to close it during the prevalence of cold weather, inasmuch as it was impossible to maintain the requisite temperature along with efficient ventilation.

The efficient heating of the wards by means of a system of hot-water

pipes, similar to that so successfully employed in the Diphtheria wards, has been under consideration, and I would take this opportunity of urging upon you the extreme desirability of heating all the wards in this way before next winter. All properly-devised Fever Hospitals, where a very free supply of fresh air is required, are heated in part at least by hot-water pipes or by radiators.

The erection of the proposed nurses' blocks will supply a long-felt want, and will, I hope, do something towards making fever nursing more popular among trained nurses. Whether it be the danger incident to fever work or the social isolation to which fever nurses are subjected that makes fever nursing little sought after, I cannot say, but the fact remains, and it seems to me that every inducement should be offered to highly-trained nurses to enter the service. The improved accommodation which you are about to provide will, no doubt, help to attract such nurses, but I also think that the charge nurses, who have the corresponding position and responsibilities here that the sisters of the wards in a general hospital have, should be designated "sisters," not nurses, and this would, I am sure, induce highly-trained women to enter the service who would not otherwise do so.

On account of the prevalence of Scarlet Fever, it was found impossible to clean all the wards last year, but I hope that this year the whole of the Hospital will be thoroughly cleaned.

I gladly acknowledge the assistance my fellow-officers have rendered me in carrying on the work of the Hospital.

I remain, Madam and Gentlemen,

Your obedient Servant,

(Signed) JOHN MACCOMBIE,

Medical Superintendent.

No. 7.

REPORT OF DR. F. N. HUME, MEDICAL SUPERINTENDENT OF
THE NORTHERN HOSPITAL.

(For Statistics, see pp. 80 to 109.)

NORTHERN HOSPITAL,
WINCHMORE HILL, LONDON, N.,
February, 1893.

To the Committee of Management.

MADAM AND GENTLEMEN,

I beg to present my Annual Report for 1892.

During the year 4,907 patients were admitted, 4,597 were discharged recovered, and 37 died.

The percentage mortality was 0·77.

Of the admissions, 4,666 were Scarlet Fever, 201 Diphtheria, and 40 Enteric Fever cases. 1,253 of those admitted were children of five years old and under.

In 47 cases, 31 of which were fatal, Diphtheria supervened during Scarlatinal convalescence. Of these, five occurred within one day, and 14 within one week, after admission to this Hospital. Sixteen of those attacked were children under five, 21 were aged from five to nine, nine from 10 to 14, and one above 14.

The mortality was 64 per cent., declining from 93 per cent. in children under five, to 22 per cent. in those from 10 to 14 years of age. The cases in nearly all instances were associated with damp and chilly weather and a wet state of the ground.

Twenty-eight cases of Measles occurred, and of these four died, three of the fatal cases being complicated with Diphtheria.

Ten of these 28 cases were admitted while in the incubation period of the disease, contracted at one or other of the acute Hospitals. The whole number may therefore be divided into 10 groups: of these, four were limited to the patient originally attacked, two extended to two patients, one to three, one to four, one to six, and one to seven.

The possibility of the importation of 10 separate centres of infection,

and the limitation of the effect of these to 28 cases, sufficiently indicate the importance and the value of the reservation in a convalescent Hospital of wards in which patients on their first exhibition of the symptoms of dangerous infectious disease can be isolated.

Complications have on the whole been relatively more numerous than in the previous year.

One Scarlet Fever convalescent, a child aged four, developed Enteric Fever three days after admission. The disease ran a normal course, and terminated favourably.

Sixteen Diphtheria convalescents contracted Scarlet Fever, and of these one died of Nephritis and Pericarditis.

The general health of the staff has been good. Six assistant-nurses and two laundry-maids contracted Scarlet Fever; all recovered.

In the early part of the year several members of the staff were attacked by Influenza, and in one case, that of Nurse A. Clark, I regret to say the attack was fatal.

In view of the increasing demands upon the Board's Hospitals during the summer, the accommodation of the Hospital was extended by an addition to the number of beds in the Pavilions, and subsequently by the erection of eight huts. These were opened in rapid succession in September and the first two weeks of October. The total accommodation was thus raised to 972 beds, of which 940 were available for Scarlet Fever. The largest number in Hospital at one time was 947, on November 4th to 8th, and of these 939 were Scarlet Fever cases.

During the year the important addition to the administrative block of a building for the further accommodation of the staff has been commenced. The alterations and improvements decided upon by you in connection with the drainage of the Pavilions are now being carried out, and the extension of tarpaving to the airing courts of all the Pavilions not hitherto provided with it will shortly be completed. The benefit of this measure is already apparent, and experience of its effect, as far as it at present extends, confirms the opinion that it will be beneficial to the health as well as the comfort of the patients.

The year has been one of hard work, and I testify with much pleasure to the readiness and thoroughness with which duty has been performed in every department of the Institution.

I am, Madam and Gentlemen,

Your obedient Servant,

(Signed) F. N. HUME,

Medical Superintendent.

No. 8.

REPORT OF DR. C. E. MATTHEWS, MEDICAL SUPERINTENDENT
OF THE GORE FARM HOSPITAL.

(For Statistics, see pp. 80 to 109.)

GORE FARM HOSPITAL,
DARENTH, DARTFORD, KENT,
27th February, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

I beg to present to you my Report for 1892.

The Hospital was re-opened for the reception of Scarlet Fever convalescents on the 3rd July. Between this date and the 31st December, 2,867 patients were admitted, of whom 2,213 were discharged recovered, 26 died, and 628 remained under treatment at the end of the year. The mortality, according to formula, was 1·01 per cent.

The 26 deaths proceeded as follows:—14 from Diphtheria, five from Measles, of which one was complicated with Diphtheria, two from Acute Nephritis, two from Scarlatinal Relapse, and one each from Meningitis, Gangrene of Lung, and old Cardiac Disease.

The general health of the patients has been remarkably good. The table of complications shows, in proportion to the numbers treated, a very small percentage of affections commonly left in the train of Scarlet Fever.

During the late epidemic a considerable number of cases were transferred to this Hospital early in the fourth week of the fever, but no ill effects from the journey in ambulance came under my notice.

Of diseases incidental to convalescence, there occurred 27 cases of Measles, 21 of Varicella, nine of Whooping-cough. These diseases were introduced by patients in the stage of incubation, and are to be distinguished from the following, which originated in the Hospital, viz., 71 cases of Diphtheria, 96 of Tonsillitis, and 51 of Ulcerative Stomatitis.

I have submitted to you, in a special Report, which you have had printed, the facts which have been elicited relative to the occurrence of Diphtheria, and in my opinion these tend to establish that in this Hospital the incidence

of the disease was correlated to the amount of cubic space allowed to the patients. As soon as the cubic space per head could be effectively increased, the disease vanished completely. It would, in my opinion, appear to be desirable to make a material reduction in the accommodation in the event of the Hospital being used for Scarlet Fever on any future occasion.

The accommodation of the Upper Hospital for 600 patients was exhausted on the 3rd August, exactly one month from the date of opening. The Infirmary Wards at the Lower Hospital were then prepared and opened, and subsequently the accommodation was increased by the erection upon the same site of four wooden huts for 100 additional patients. By these means the total accommodation of the Hospital was raised to 836 beds. Invaluable assistance was rendered at the opening by the temporary loan of nurses from the Hospital Ships, which enabled us to deal with the difficulty of engaging a suitable class of nurses quickly enough to meet our wants, owing to the rapid influx of patients.

Amongst improvements which have been effected since the Hospital was opened are (1) extensions and additions to the laundry; (2) formation of new roads and pathways; (3) erection of a chapel to hold 300 people. Concrete steps and pathways are being constructed to connect the Upper and Lower Hospitals, and will replace the dangerous wooden ones which hitherto served that purpose.

For the first time in its history the present Hospital has been filled to its utmost capacity, and experience has proved the need for (1) additional accommodation for the nursing staff; (2) provision of suitable quarters for your Medical Officers; (3) isolation wards; and (4) Matron's store-room. I am glad to record that you promptly recognised the want that exists in all these respects, and have obtained the Board's sanction to provide the necessary accommodation.

Three officers contracted Scarlet Fever, viz., one assistant-nurse and two ward-maids. Two charge nurses and one assistant-nurse contracted Diphtheria. All of these recovered. A large number of officers have been warded with minor illnesses, mainly Tonsillitis and Influenza.

I take this opportunity to acknowledge the great assistance which I have received from my fellow-officers, and am also glad to testify to the general good-conduct and efficiency of the staff.

Thanking you for your help and support,

I am, Ladies and Gentlemen,

Your obedient Servant,

(Signed) C. E. MATTHEWS,

Medical Superintendent.

No. 9.

REPORT OF DR. T. F. RICKETTS, MEDICAL SUPERINTENDENT OF
THE SMALLPOX HOSPITAL SHIPS.

(For Statistics, see pp. 110 to 125.)

HOSPITAL SHIPS, LONG REACH,
NEAR DARTFORD, KENT,

7th March, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

On December 31st, 1891, three patients remained in the Hospital; 343 have been admitted during the past year; 39 remained in Hospital on December 31st, 1892.

The largest number of cases admitted during a month was in May, when there were 112 admissions. The maximum number of patients under treatment at one time was 101 on May 30th. The Hospital was never empty during the year. The minimum was reached in November, when for some days two patients were under treatment. The "Castalia" was opened for male patients on May 29th, and was so used until July 2nd. From that date until the end of the year patients were treated on the "Atlas" only.

Of the 343 patients admitted to the Hospital as suffering from Smallpox, 23 were not so suffering. The diseases in these cases were diagnosed here as follows:—

Chickenpox	...	11	Lichen	...	...	1
Febricula	...	4	Herpes	...	...	1
Syphilis	...	2	Purpura Simplex			1
Erythema	...	1	Nil	...	...	1
Tinea	...	1				

In addition, an infant not suffering from Smallpox was admitted with his mother; and in four cases it was doubtful if the disease was Smallpox.

Thirty patients died, one of whom was not admitted with Smallpox; giving a gross mortality of 8.74 per cent., and a mortality among those patients admitted with Smallpox of 9.20. Of the 30 fatal cases, in two death was caused or accelerated by an independent disorder. One (No. 13) was a case of Discrete Smallpox in a debilitated child, and in the other case (No. 30) death was directly due to Bright's Disease and Uræmia. The former of these was unvaccinated, the latter was stated to have been vaccinated. The following is a list of the fatal cases:—

FATAL CASES OF SMALLPOX.—HOSPITAL SHIPS.

No.	Initials.	Age.	Sex.	Dates of					Statement as to Primary Vaccination.	No. of Scars.	Collective Area.	Fracture.	Re-vaccination	Type of Disease.	Remarks.
				Initial Illness.	Eruption.	Admission.	Transfer.	Death.							
1	G. F.	31	M	28 Feb.	1 Mar.	4 Mar.	...	10 Mar.	In infancy ...	sq. in. ...	...	Not re-vaccinated	Confluent ...	
2	H. S.	31	M	26 Feb.	4 Mar.	7 Mar.	...	15 Mar.	Does not know	...	...	...	Confluent ...	
3	A. F.	13 mos.	M	16 Mar.	17 Mar.	21 Mar.	...	25 Mar.	Not vaccinated	...	...	...	Confluent ...	
4	E. C.	18 mos.	F	20 Mar.	23 Mar.	23 Mar.	...	30 Mar.	Vaccinated, 16 March, 1892	...	...	...	Confluent ...	
5	K. A. W.	8 days	F	...	26 Mar.	26 Mar.	...	3 Apr.	Not vaccinated	...	...	...	Confluent ...	
6	C. H. B.	35	M	20 Mar.	22 Mar.	27 Mar.	...	4 Apr.	In infancy ...	...	...	Not re-vaccinated	Confluent ...	
7	C. S.	62	M	4 Apr.	6 Apr.	7 Apr.	...	22 Apr.	In infancy ...	0.11	none	Not re-vaccinated	Confluent ...		
8	M. R. C.	5 mos.	F	...	10 Apr.	S. E. H., 14 Apr. H. S., 15 Apr.	...	15 Apr.	Not vaccinated	...	...	...	Confluent ...	
9	J. S.	34	M	11 Apr.	15 Apr.	20 Apr.	...	26 Apr.	In infancy ...	...	...	Not re-vaccinated	Confluent ...	
10	C. O.	3	F	...	...	1 May	...	4 May	Not vaccinated	...	...	...	Discrete ...	
11	J. C.	19	M	3 May	7 May	7 May	...	9 May	In infancy, but does not know whether successfully	...	...	Not re-vaccinated	Hæmorrhagic	
12	W. H.	49	M	7 May	10 May	11 May	...	17 May	In infancy ...	...	...	Not re-vaccinated	Confluent ...	
13	W. T.	16 mos.	M	10 May	12 May	14 May	...	15 May	Not vaccinated	...	...	...	Discrete ...	

14	M. C.	40	M	10 May	14 May	16 May	...	19 May	In infancy ...	4	0.35	None	In 1871, successfully	Confluent ...	
15	L. B.	2	M	...	18 May	19 May	...	31 May	Not vaccinated	...	...	...	...	Confluent ...	
16	B. W.	8 mos.	F	23 May	25 May	28 May	...	31 May	Not vaccinated	...	...	...	...	Confluent ...	
17	P. E. L.	4	F	21 May	24 May	28 May	...	2 June	In infancy, unsuccessfully	None ...	...	...	...	Confluent ...	
18	M. A. F.	2	F	11 June	13 June	29 May	...	20 June	Not vaccinated	...	...	...	...	Confluent ...	Not admitted with Smallpox.
19	M. K.	2½	F	30 May	1 June	2 June	...	11 June	Not vaccinated	...	...	...	...	Confluent ...	
20	W. B.	57	M	16 June	17 June	21 June	...	29 June	Not vaccinated	...	...	...	...	Confluent ...	Stated to have been inoculated in childhood.
21	E. R.	5	F	16 June	16 June	22 June	...	26 June	Not vaccinated	...	...	...	...	Confluent ...	
22	W. H.	14 mos.	M	18 June	22 June	27 June	...	1 July	Not vaccinated	...	...	...	...	Confluent ...	
23	S. G.	20	F	28 June	1 July	3 July	...	7 July	In infancy ...	Obscured by eruption	...	...	Not re-vaccinated	Hæmorrhagic	
24	M. A. E.	34	F	2 July	5 July	6 July	...	17 July	In infancy ...	Obscured by eruption	...	...	Not re-vaccinated	Confluent ...	
25	W. B.	39	M	4 July	6 July	7 July	...	16 July	Not vaccinated	...	...	...	...	Confluent ...	
26	F. P.	49	M	12 July	15 July	16 July	...	23 July	In infancy ...	Obscured by eruption	...	...	Not re-vaccinated	Confluent ...	
27	G. S.	27	M	17 July	18 July	20 July	...	28 July	In infancy ...	Obscured by eruption	...	...	Not re-vaccinated	Confluent ...	
28	W. S.	37	M	10 Nov.	14 Nov.	16 Nov.	...	25 Nov.	In infancy ...	Obscured by eruption	...	...	Not re-vaccinated	Confluent ...	
29	A. H.	46	M	23 Nov.	25 Nov.	25 Nov.	...	28 Nov.	In infancy ...	5	1.05	None	19 years ago...	Hæmorrhagic	
30	G. B.	46	M	3 Dec.	5 Dec.	6 Dec.	...	12 Dec.	In infancy ...	None ...	...	...	Not re-vaccinated	Confluent ...	Complicated by Pright's Disease

Five patients were admitted to the Board's Hospitals in London who were not transferred to this Hospital; four of these patients died and one recovered; the former were unvaccinated, the latter was vaccinated. These five cases are included in the Smallpox statistics. Their inclusion brings the Smallpox mortality up to 10·44 per cent.

Of the 23 patients admitted to this Hospital suffering from other diseases, 10 contracted Smallpox during their residence here. In nearly all the cases the attack was mild, but in one it was attended with a fatal issue. These 10 cases are not included in the Smallpox statistics, but I append a list of them here, with particulars as to vaccination and re-vaccination. In two of the cases (8 and 9) the attack was so mild as to be almost unrecognisable.

No.	Initials.	Age.	Sex.	Disease with which Admitted.	Date of				Result.	Statement as to Primary Vaccination.	No. of Scars.	Collective Area.	Fraction involved.	Re-vaccination.	Type of Disease.
					Admission.	Initial illness.	Eruption.	Discharge or Death.							
1	J. W.	6	M	Varicella	16 May	29 May	31 May	17 June	Recovery	In infancy	None	sq. in. ...	...	16 May, successfully	Mild discrete.
2	F. C.	42	F	Febricula	19 May	...	1 June	10 June	Recovery	In infancy	4	.39	$\frac{3}{4}$	Æt. 21 years; re-vaccination at Hospital unsuccessful	Two or three spots.
3	T. W. C.	12	M	Febricula	19 May	29 May	31 May	15 June	Recovery	In infancy	4	2.35	Nil	Re-vaccination at Hospital unsuccessful	About 15 spots.
4	E. S.	19	F	Erythema	19 May	...	2 June	7 June	Recovery	In infancy	3	.51	$\frac{1}{4}$	21 May, successfully	Extremely mild.
5	M. A. F.	2	F	Varicella	29 May	11 June	13 June	20 June	Death ...	Not vaccinated	None	...	...	Vaccination at Hospital unsuccessful	Confluent.
6	C. E.	7	F	Varicella	31 May	8 June	11 June	7 July	Recovery	No statement	None	...	...	1 June, successfully	Very mild discrete.
7	J. F.	16	M	Varicella	3 June	12 June	14 June	22 June	Recovery	In infancy	3	.55	Nil	Æt. 10 years; 3 June, successfully	One or two spots.
8	I. S.	3	M	Varicella	16 June	6 July	7 July	8 July	Recovery	In infancy	4	.57	$\frac{1}{4}$	} Re-vaccination at Hospital unsuccessful	} Extremely mild.
9	M. S.	1 $\frac{1}{2}$	F	Varicella	16 June	...	27 July	8 July	Recovery	In infancy	3	.32	Nil		
10	M. F.	27	F	Purpura	23 Sep	9 Oct.	11 Oct.	7 Nov.	Recovery	In infancy	2	Indefinite	Nil	2 Oct., successfully	Discrete.

The epidemic of 1892 commenced early in January. The disease first made its appearance among a colony of Swiss waiters. The first case seems to have occurred as far back as October, 1891. A Swiss waiter, who was employed at a large London hotel, contracted Smallpox in a mild and unrecognised form, and introduced it into a house in St. Pancras which was frequented by the members of a club of Swiss waiters. This case was followed by others in the same house, which were also unrecognised as being cases of Smallpox. The first of this group of cases that was removed to Hospital was a man, an English waiter, who lived in a house opposite to that frequented by the members of the Swiss club. He was admitted on December 31st, 1891. In January, four other cases were admitted in which the disease could be traced to the same source.

In February, four more cases of Smallpox were admitted from various Metropolitan Unions, the origin of the disease not being clearly traced in any of them. Early in March, it broke out in a crowded locality in Shoreditch. The source of infection in this instance was a child who fell ill about 7th February, her complaint being diagnosed as Chickenpox. It is not known how she contracted the disease, but it spread from her to other inmates of the same house, and thence rapidly to the surrounding population. It was introduced again into St. Pancras early in March by a man who was infected in Shoreditch, and who was the origin of several other cases. In a similar way the disease was introduced into Bethnal Green, Hackney, and other Unions. Meantime it had cropped up in other parts of London, the cases being often isolated, sometimes a case becoming the focus of a small and localised outbreak; but in no part, save in Shoreditch, did the disease obtain any material hold. From that Union, excluding cases which were diagnosed otherwise here, 66 cases were admitted during the months of March, April, May, and June, or nearly a quarter of the total number of cases admitted in the first eight months of the year. The majority of those cases occurred in a circumscribed area of that Union, the chief factor that aided the spread of the disease being, no doubt, the density of the population in the locality. But it was also spread by the agency of at least one school, and one or two factories or workshops.

During the year 44 cases have been admitted from districts outside the Metropolitan area. Of these cases, 34 were admitted from the neighbourhood of Stone, in the Dartford R.S.A. The first case was admitted on 2nd February, and it is unknown how the disease was contracted. From this patient the disease spread to other members of the same family, then to the inmates of adjoining cottages, and to other residents in the neighbourhood. The last case was admitted from this district on 20th July. On 23rd April, a case was admitted from Erith, which was followed by three other cases on

the 9th and 18th of May. In addition, five cases were admitted from Erith in December, all five cases being connected ones. As in the case of the Stone outbreak, the origin of the disease on the two occasions of its appearance in Erith is unknown.

On glancing at the table showing the monthly admissions for the year 1892, it is seen that the cases separate themselves into two groups. The number of Smallpox admissions rises during the early part of the year, attains a maximum in May, and falls continuously till September. During August, five cases were admitted, the last on August 19th, and then the outbreak may be said to have been at an end. London was free of Smallpox. During September two patients were admitted, one of whom was not suffering from Smallpox. The other patient was a potman who had been on the tramp for some time, getting a job occasionally at various public-houses in and out of London. It was probable that he was not infected in London. During October, four patients were admitted, two of whom were not suffering from Smallpox. Of the other two, one was admitted on 13th October. This patient's mother kept a lodging and eating house in the City, and he contracted the disease from a lodger who came from a town in Yorkshire where Smallpox was rife, and fell ill while lodging there with an unrecognised attack of the disease. The infected house was promptly dealt with, and no further cases occurred. The other patient admitted in October was a seaman who was admitted on the 26th October. He arrived in London a day or two before he was taken ill, in a ship which came from Smyrna. He had contracted Smallpox from the master of the vessel, who fell ill with the disease some ten days to a fortnight after leaving that port.

No other patient was admitted till 12th November, when a fresh epidemic may be said to have begun. The first patient was a man who was admitted from the Infirmary of Hackney Union. He had been an inmate of that institution for years, and I was quite unable to find out how he contracted the disease. The probability is, however, that it was imported by some man who tramped into London from some infected centre in the provinces, a method by which the disease has been spread sufficiently frequently since. The disease next appeared in Islington, whence six cases were admitted on 14th November. The origin of the outbreak here was also obscure. The first person to be attacked was a married woman of a respectable class who had not been away from home, and in whose house no stranger had been staying who would be likely to have brought the disease. The nature of her illness was not recognised for 19 days. The attack was a mild one, and she went about her customary duties. In the house two families resided, besides a lodger and his wife. The

woman's husband and two of her children contracted the disease, as did the father of the second family, his three children, and the lodger. The only members of the household who escaped were a young vaccinated child, the mother of the second family, and the lodger's wife. In addition, the following persons were infected from the same source :—(1) the son of a man who was employed to disinfect the house, and who had allowed the boy to accompany him ; (2) the daughter-in-law of the woman who first contracted the disease ; (3) another woman who had visited the house ; and (4) a third woman who resided in the immediate neighbourhood. Two of the brothers of (1) also contracted the disease from him. In all, 14 persons were infected more or less directly by the original case.

Another interesting series of cases was traced to the case I have referred to as being admitted from Hackney Infirmary. By this man two more patients in the same Infirmary were infected. One of these was admitted here ; the other left the Infirmary before the disease had developed. When the rash appeared, its nature was not recognised, and the man continued at his employment. From him four persons in the same house contracted Smallpox and were admitted here. In addition, two relatives, who on a certain occasion visited the family, contracted the disease and were admitted. At that time the source of infection in these cases was unknown. The facts that all these persons fell ill with the disease within a short time of one another, and that two of them had visited the house on one occasion only, and had met there only members of the household, made it probable that one member of the household who had not been admitted was suffering from the disease in an unrecognised form ; but, although an attempt was made to discover this individual, the explanation of the outbreak was not forthcoming till many weeks afterwards I had an opportunity of speaking to a fellow-workman of the man whose child had contracted the disease from the same source. These are instructive instances of the manner in which Smallpox spreads through mild and unrecognised cases.

Another patient living in Hackney was taken into a general Hospital on the appearance of his initial symptoms ; when the rash developed, he was removed here. Three in-patients of the same Hospital were subsequently admitted here, and one of them died. No precautions were apparently taken to prevent the disease spreading.

During the latter part of the year, the only Union in which any noticeable number of cases occurred among the settled population was Camberwell. Seven cases were admitted from there. These cases all occurred within a radius of about half a mile. They were mostly unconnected, and the origin of them is quite unknown. With the exception of these and a

few other cases, the patients admitted at the end of the year were drawn from the vagrant class. In some instances it was clear that the disease had been contracted in the provinces, the patients having tramped into London shortly before the illness commenced. Doubtless the present epidemic is chiefly due to the importation of the disease in this way; but many patients have contracted the disease by being brought into contact with infected persons in the various places which persons of this class frequent. In many instances Salvation Army shelters have been shown to be at fault, the aggregation of individuals in these places, and the imperfect arrangements for personal hygiene that obtain in them, affording abundant opportunities for the spread of the disease; but in other refuges of a like nature, in common lodging-houses, and in the casual wards of the Metropolitan Unions, the same facilities occur and have produced the same results.

In fact, the present epidemic is a most instructive example of the way in which Smallpox may spread in spite of such a perfect organisation for the isolation of infected persons as exists in London. The difficulty lies in reaching those cases in which the disease is present in such mild form as to render its victims hardly ill; such cases, nevertheless, constituting a grave danger to the community. And this difficulty is enhanced when the class chiefly affected is the lowest, for then, while the facilities for the spread of the disease are greatest, the chance of the patients coming under medical observation is least.

During the year two members of the staff contracted Smallpox. One of these was an assistant-nurse and the other a ward-maid. The attack in each case was a mild one, and occurred shortly after joining the staff of the Hospital.

I present for the information of the Managers a return showing the number of persons who have been engaged at the Hospital from the year 1884 until the end of last year, and who have been, therefore, exposed to the infection of Smallpox; and the number of such persons who have contracted that disease. The figures relating to the permanent staff of the Hospital were obtained from the staff register. In addition to the members of the actual staff, a large number of contractor's men and others have been employed temporarily. In 1884, probably the greatest number of contractor's men were employed, but for that year I can find no record. I have placed the number of such men employed in 1885 at 150. This figure is a near approximation, and the error is certainly one of deficiency. For the years 1886, 1887, and 1888, I have obtained the numbers of contractor's men employed from the Medical Superintendent's Annual Reports, and for the years 1889-1892 from the Vaccination Register.

The total number of persons employed during the years 1884-1892 (with the exception I have mentioned for 1884) has been—

Female staff	...	...	...	387
Male staff	...	...	...	238
Contractor's men, &c.	...	...	...	576
Total	...	...	...	<u>1,201</u>

The number of those who contracted Smallpox was six.

The following table shows the number who were employed at the Hospital in each year. I have divided them into four classes. Class I. includes those who were brought into intimate contact with patients, viz., nurses and members of the Medical Staff. Class II. includes those who would be somewhat less directly exposed to infection, such as ward-maids and laundry-maids. Class III., those whose duties did not as a rule necessitate their entering the wards or their being directly exposed to infection in other ways. Class IV. includes contractor's men and others temporarily employed at the Hospital. Such a classification must necessarily be an arbitrary one. And it cannot be admitted that any part of the Ships is free from infection of Smallpox.

Year.	Class.	Number Employed.	Number Contracting Smallpox.	Year.	Class.	Number Employed.	Number Contracting Smallpox.
1884	I.	71	...	1886	I.	12	...
	II.	67	2		II.	41	...
	III.	145	2		III.	57	...
	IV.	Unknown.	...		IV.	146	...
Total	...	283	4	Total	...	256	...
1885	I.	42	...	1887	I.	4	...
	II.	81	...		II.	19	...
	III.	117	...		III.	32	...
	IV.	150	...		IV.	47	...
Total	...	390	...	Total	...	102	...

Year.	Class.	Number Employed.	Number Contracting Smallpox.	Year.	Class.	Number Employed.	Number Contracting Smallpox.
1888	I.	4	...	1891	I	10	...
	II.	17	...		II.	17	...
	III.	25	...		III.	37	...
	IV.	36	...		IV.	56	...
Total		82	...	Total		120	...
1889	I.	8	...	1892	I.	42	1
	II.	13	...		II.	28	1
	III.	32	...		III.	68	...
	IV.	85	...		IV.	20	...
Total		138	...	Total		158	2
1890	I.	9	...				
	II.	16	...				
	III.	39	..				
	IV.	36	...				
Total		100	...				

The following table gives the number entering the service of the Hospital in each year; that is, the number in each year newly exposed to infection. The same classification is adopted.

Year.	Class.	Number entering Service.	Number Contracting Smallpox.	Year.	Class.	Number entering Service.	Number Contracting Smallpox.
1884	I.	70	...	1889	I.	2	...
	II.	22	2		II.	7	...
	III.	172	2		III.	14	...
	IV.	Unknown.	...		IV.	85	...
Total		264	4	Total		108	...
1885	I.	10	...	1890	I.	3	...
	II.	14	...		II.	8	...
	III.	72	...		III.	16	...
	IV.	150	...		IV.	36	...
Total		246	...	Total		63	...
1886	I.	...	...	1891	I.	3	...
	II.	4	...		II.	10	...
	III.	17	...		III.	10	...
	IV.	146	...		IV.	56	...
Total		167	...	Total		79	...
1887	I.	...	...	1892	I.	38	1
	II.	15	...		II.	26	1
	III.	17	...		III.	32	...
	IV.	47	...		IV.	20	...
Total		79	...	Total		116	2
1888	I.	4	...	Totals	I.	130	1
	II.	11	...		II.	117	3
	III.	9	..		III.	359	2
	IV.	36	...		IV.	576	...
Total		60	...	Grand Totals ...		1,182	6

The difference between the number 1,182 and the number 1,201 which was given above as representing the number of persons employed on board

the Ships during these years is due to the fact that there were certain persons attached to the staff in 1884 who had been previously on the staff of the Ship "Atlas" when it was moored elsewhere.

The following are details of the cases of the six persons who contracted Smallpox while in the service of the Hospital:—

No.	Initials.	Joined Staff.	Service.	Initial Illness.	Eruption.	Type of Disease.	Result.	Vaccination.
1	J. F.	28 Apr., 1884	Ward-maid	26 May	28 May	...	Recovery	Vaccinated unsuccessfully on day of joining only.
2	E. W.	29 May, 1884	Porter	8 June	11 June	Confluent	do.	Do.
3	A. M.	7 July, 1884	Ward-maid	...	...	"A few spots"	do.	Vaccinated July 8th (unsuccessfully) and 15th (partially successfully).
4	G. W.	24 Oct., 1884	Stoker	3 Nov.	5 Nov.	"Modified confluent"	do.	Vaccinated 24th unsuccessfully, 31st successfully.
5	L. W.	9 June, 1892	Assistant-Nurse	24 June	27 June	Discrete	do.	Vaccinated after joining on three occasions unsuccessfully.
6	L. C.	9 Dec., 1892	Ward-maid	24 Dec.	26 Dec.	"Very mild discrete"	do.	Vaccinated after joining on three occasions unsuccessfully. On the fourth trial (Dec. 19) successfully.

No. 4 was infected before he joined the staff. He came on board on 21st October, when he visited the Hospital to seek employment.

I am, Ladies and Gentlemen,

Your obedient Servant,

(Signed) T. F. RICKETTS,
Medical Superintendent.

EASTERN HOSPITAL.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.		Total under treatment during 1892.	Discharged during 1892.		Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec., 1892.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet	219	2,955	...	3,174	740	1,937	225	7·68†	272
Diphtheria	44	556	...	600	208	148	198	35·67	46
Enteric	38	157	...	195	126	19	21	13·00	29
Typhus ... ..	...	7	...	7	6	...	1	14·28	...
Other diseases	21	328	...	349	278	...	48	14·67	23
Totals	322	4,003	...	4,325	1,358	2,104	493	12·39	370

NORTH-EASTERN HOSPITAL.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.	Total under treatment during 1892.	Discharged during 1892.	Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec., 1892.
Scarlet	Opened	807	807	395	27	4·39	385
Diphtheria	8th Oct.,	...	...	...	...	...	...
Enteric	1892.	...	...	...	...	...	...
Other diseases ... ..	...	9	9	2	2	30·76	5
Totals ... ..	...	816	816	397	29	4·66	390

NORTH-WESTERN HOSPITAL.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.	Total under treatment during 1892.	Discharged during 1892.	Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec., 1892.
Scarlet	280	2,389	2,670	1,196	151	(a) 6·37 (b) 5·63	322
Diphtheria	24	648	682	468	138	21·83 16·61	76
Enteric	15	82	97	70	14	16·86	13
Typhus ... ..	...	...	...	...	...	...	...
Other diseases	1	42	43	27	15	35·72	1
Totals	320	3,161	3,492	1,761	318	10·17	412

WESTERN HOSPITAL.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.	Total under treatment during 1892.	Discharged during 1892.	Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec., 1892.
Scarlet	109	1,900	2,009	277	104	5·71*	269
Diphtheria	13	247	260	105	78	32·09	21
Enteric	21	38	59	29	2	4·81	14
Typhus ... ..	...	3	3	3	...	...	...
Other diseases	6	99	105	86	13	13·13	5
Totals	149	2,287	2,436	500	197	8·92	309

SOUTH-WESTERN HOSPITAL.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.	Total under treatment during 1892.	Discharged during 1892.	Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec., 1892.
Scarlet	202	2,148	2,350	860	107	5·05	267
Diphtheria	43	420	463	303	93	22·50	57
Enteric	26	91	117	82	15	15·90	20
Typhus ... ..	...	3	3	2	1	33·30	...
Other diseases	2	88	90	71	18	20·30	1
Totals	273	2,750	3,023	1,318	234	8·62	345

SOUTH-EASTERN HOSPITAL.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.		Total under treatment during 1892.	Discharged during 1892.		Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec. 1892.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet	194	2,892	†4	3,090	502	2,118	163	5·74	307
Diphtheria	10	138	...	148	52	...	75	56·60	21
Enteric	76	62	...	138	115	4	13	13·33	6
Typhus	3	6	...	9	9	...	...	...	...
Other diseases	13	159	...	172	125	...	44	26·82	3
Totals	296	3,257	4	3,557	803	2,122	295	9·10	337

NORTHERN HOSPITAL.

Scarlet	435	2	4,652	5,090	4,304	...	36	0·79	749
Diphtheria	27	...	204	231	222	...	1	0·47	8
Enteric	22	...	37	59	59	...	...	...	...
Other diseases ... ..	...	...	1	1	1	...	...	...	...
Totals	484	2	4,894	5,381	4,586	...	37	0·775	757

GORE FARM HOSPITAL.

Scarlet	Reopened 3rd July, 1892.	...	2,867	2,867	2,213	...	26	1·01	628
Other diseases ... ..	...	...	..	...	...	...	...	...	...
Totals ... ..	...	...	2,867	2,867	2,213	...	26	1·01	628

SUMMARY.

DISEASES.	Remain- ing on 31st Dec., 1891.	Admitted during 1892.		Total under treatment during 1892.	Discharged during 1892.		Died during 1892.	Mortality per cent.	Remain- ing on 31st Dec., 1892.
		Direct from homes.	From other Hospitals of Board.		Re- covered.	To other Hospitals of Board.			
Scarlet	1,439	13,093	7,524	14,532	10,487	7,531	839	6·87	3,199
Diphtheria	161	2,009	214	2,170	1,358	214	583	29·51	229
Enteric	198	430	37	628	481	37	65	13·31	82
Typhus	3	19	...	22	20	...	2	9·76	...
Totals	1,801	15,551	7,775	17,352	12,346	7,782	1,489	10·13	3,510
Other diseases	43	725	1	768	590	1	140	19·23	38
Grand Totals	1,844	16,276	7,776	18,120	12,936	7,783	1,629	10·56	3,548

† 6·6 when corrected for Deaths due to Diphtheria, Measles, and diseases existing before the onset of the attack of Scarlet Fever.

* Including 12 Deaths from Intercurrent Diphtheria. † From the Hospital Ships.

North-Western Hospital—(a) Calculated on total Deaths. (b) Calculated on total Deaths minus Deaths occurring within 30 hours after admission.

N.B.—The Mortality rates are calculated according to the Registrar-General's Formula—i.e., by dividing the Deaths, multiplied by 100, by half the sum of the Admissions, Discharges, and Deaths for the year.

EASTERN HOSPITAL.

MONTH.	ADMISSIONS.								DEATHS.	DISCHARGES.	
	Scarlet.		Diphtheria.		Enteric.	Typhus.	Other Diseases.	Total.		Re-covered.	To other Hospitals of Board.
	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.							
January ...	107	...	35	...	7	...	13	162	22	74	101
February ...	134	...	32	...	7	...	10	183	21	96	91
March ...	133	...	61	...	5	...	14	213	33	70	105
April ...	176	...	52	...	7	3	25	263	28	58	133
May ...	225	...	48	...	10	...	39	322	37	81	136
June ...	299	...	53	...	10	...	32	394	54	132	164
July ...	351	...	55	...	20	3	52	481	49	140	241
August ...	340	...	46	...	8	1	32	427	44	109	256
September ...	411	...	34	...	27	...	28	500	52	123	297
October ...	241	...	50	...	16	...	27	334	45	130	163
November ...	333	...	39	...	21	...	29	422	55	206	216
December ...	205	...	51	...	19	...	27	302	53	139	201
Totals ...	2,955	...	556	...	157	7	328	4,003	493	1,358	2,104

NORTH-EASTERN HOSPITAL.

January ...	...	...	...	...	..	...	...	...	...	...	...
February ...	...	...	...	...	...	...	...	...	...	...	...
March ...	...	...	...	...	..	...	...	...	...	...	...
April ...	...	...	...	...	...	...	...	...	...	...	...
May ...	...	...	...	...	...	...	...	...	...	...	...
June ...	...	...	...	...	...	...	...	...	...	...	...
July ...	...	...	...	...	..	...	...	...	...	...	...
August ...	...	...	...	...	...	...	...	...	...	...	...
September ...	...	...	...	...	...	...	...	...	...	...	...
October ...	400	...	...	...	...	...	2	402	7	1	...
November ...	202	...	...	...	...	...	3	205	9	49	...
December ...	205	...	...	...	...	...	4	209	13	347	...
Totals ...	807	...	...	...	...	...	9	816	29	397	...

NORTH-WESTERN HOSPITAL.

January ...	71	...	25	...	3	...	6	105	14	126	1
February ...	66	...	36	...	3	...	...	105	12	130	...
March ...	89	...	28	...	6	...	4	127	20	110	...
April ...	130	...	24	...	3	...	2	159	20	113	...
May ...	147	...	45	...	1	...	4	197	26	113	1
June ...	164	...	74	...	4	...	5	247	30	155	...
July ...	303	1	41	10	6	...	2	363	30	149	162
August ...	419	...	81	...	14	...	9	523	38	124	286
September ...	266	...	87	...	11	...	2	366	30	135	160
October ...	325	...	63	...	12	...	4	404	37	189	185
November ...	248	...	68	...	10	...	3	329	29	184	153
December ...	161	...	76	...	9	...	1	247	32	233	53
Totals ...	2,389	1	648	10	82	...	42	3,172	318	1,761	1,001

WESTERN HOSPITAL.

January ...	58	...	20	...	1	...	5	84	16	33	42
February ...	38	...	9	...	1	...	9	57	4	37	38
March ...	61	...	15	...	...	...	7	83	9	25	36
April ...	57	...	19	...	1	...	8	85	10	43	51
May ...	89	...	23	...	1	...	17	130	11	30	48
June ...	131	...	13	...	3	...	3	150	12	34	79
July ...	171	...	37	...	2	...	5	215	19	32	127
August ...	303	...	20	...	3	2	6	339	19	31	143
September ...	297	...	22	...	9	1	10	339	35	37	265
October ...	289	...	34	...	4	...	11	338	23	66	249
November ...	259	...	18	...	8	...	9	294	19	64	230
December ...	142	...	17	...	5	...	9	173	20	68	122
Totals ...	1,900	...	247	...	38	3	99	2,287	197	500	1,430

SOUTH-WESTERN HOSPITAL.

January ...	93	...	40	...	10	...	2	145	22	122	19
February ...	69	...	15	...	4	...	2	90	7	99	...
March ...	91	...	23	...	4	...	1	119	11	97	...
April ...	144	...	24	...	2	...	11	181	15	140	35
May ...	179	...	31	...	2	...	12	224	18	75	94
June ...	167	...	25	...	5	...	11	208	22	74	84
Carried forward	743	...	158	...	27	...	39	967	95	607	232

SOUTH-WESTERN HOSPITAL—Continued.

MONTH	ADMISSIONS.								DEATHS.	DISCHARGES.	
	Scarlet.		Diphtheria.		Enteric.	Typhus.	Other Diseases.	Total.		Re-covered.	To other Hospitals of Board.
	Direct from Homes.	From other Hospitals of Board.	Direct from Homes.	From other Hospitals of Board.							
Brought forward	743	...	158	...	27	...	39	967	95	607	232
July ...	288	...	45	...	11	3	15	362	26	89	189
August ...	222	...	55	...	14	...	12	303	40	78	155
September ...	208	...	33	...	8	...	6	255	16	146	113
October ...	266	...	48	...	10	...	5	329	16	154	149
November ...	260	...	34	...	11	...	8	313	19	112	198
December ...	161	...	47	...	10	...	3	221	22	132	90
Totals ...	2,148	...	420	...	91	3	88	2,750	234	1,318	1,126

SOUTH-EASTERN HOSPITAL.

January ...	90	...	2	...	14	...	13	119	17	81	43
February ...	75	...	8	...	11	...	3	97	16	95	...
March ...	123	...	12	...	3	...	18	156	26	90	53
April ...	209	...	6	...	1	1	21	238	26	68	117
May ...	218	...	5	...	3	...	23	249	29	43	127
June ...	234	4	11	...	4	2	12	267	26	44	141
July ...	327	...	9	...	1	3	21	361	21	83	273
August ...	357	...	19	...	2	...	16	394	34	40	262
September ...	382	...	11	...	11	...	9	413	22	42	340
October ...	329	...	22	...	7	...	9	367	24	55	291
November ...	322	...	13	...	1	...	8	344	25	60	279
December ...	226	..	20	...	4	...	6	256	29	102	196
Totals ...	2,892	4	138	...	62	6	159	3,261	295	803	2,122

NORTHERN HOSPITAL.

January ...	..	175	...	20	11	...	...	206	2	291	...
February ...	...	98	...	14	17	...	...	129	1	190	...
March ...	...	161	...	28	5	...	...	194	2	197	...
April ...	...	294	...	38	4	...	...	336	1	232	...
May ...	...	377	...	28	...	...	...	405	6	316	...
June ...	...	448	...	16	...	...	...	464	3	253	...
July ...	...	317	...	13	Transfers.	...	...	330	2	337	...
August ...	...	584	...	16	...	...	...	600	4	594	...
September ...	...	732	...	9	...	...	...	741	3	593	...
October ...	...	557	...	10	...	...	1	568	4	494	...
November ...	...	562	...	4	...	...	...	566	3	631	...
December ...	2	347	...	8	...	...	...	357	6	458	...
Totals ...	2	4,652	...	204	37	...	1	4,896	37	4,586	...

GORE FARM HOSPITAL.

January ...	...	...	...	...	...	...	...	...	...	...	...
February ...	...	...	...	...	...	...	...	...	...	...	...
March ...	...	...	...	...	...	...	...	...	...	...	...
April ...	..	...	...	...	...	...	...	...	...	...	...
May ...	...	...	...	...	...	...	...	...	...	...	...
June ...	...	...	...	...	...	...	...	...	..	...	...
July ...	...	651	...	...	...	...	...	651	2	57	...
August ...	...	503	...	...	...	...	...	503	5	371	...
September ...	..	434	...	...	...	...	...	434	6	380	...
October ...	...	469	...	...	...	...	...	469	1	441	...
November ...	...	503	...	...	...	...	...	503	6	516	...
December ...	...	307	...	..	...	...	...	307	6	448	...
Totals ...	...	2,867	...	...	...	...	...	2,867	26	2,213	...

SUMMARY.

January ...	419	175	122	20	35	...	39	615	93	727	206
February ...	382	98	100	14	26	...	24	532	61	647	129
March ...	497	161	139	28	18	...	44	698	101	589	194
April ...	716	294	125	38	14	4	67	926	100	654	336
May ...	858	377	152	28	17	...	95	1,122	127	658	406
June ...	995	452	176	16	26	2	63	1,262	147	692	468
July ...	1,440	969	187	23	40	9	95	1,771	149	887	992
August ...	1,646	1,087	221	16	41	3	75	1,986	184	1,347	1,102
September ...	1,564	1,166	187	9	66	1	55	1,873	164	1,456	1,175
October ...	1,850	1,026	217	10	49	...	58	2,174	157	1,530	1,037
November ...	1,624	1,065	172	4	51	...	60	1,907	165	1,822	1,076
December ...	1,102	654	211	8	47	...	50	1,410	181	1,927	662
Grand Totals...	13,093	7,524	2,009	214	430*	19	725*	16,276	1,629	12,936	7,783

* Exclusive of transfers.

EASTERN HOSPITAL.				NORTH-WESTERN HOSPITAL.				SOUTH-WESTERN HOSPITAL.			
AGES.	MALES.		FEMALES.		TOTAL.	AGES.	MALES.		FEMALES.		TOTAL.
	Admitted.	Died.	Admitted.	Died.			Admitted.	Died.	Admitted.	Died.	
Under 1	16	9	19	9	28	Under 1	3	5	8	7	
1 to 2	51	13	34	34	68	1 to 2	32	22	54	11	
2 to 3	95	21	64	62	126	2 to 3	53	43	96	17	
3 to 4	130	19	105	95	200	3 to 4	80	75	155	25	
4 to 5	172	22	102	103	205	4 to 5	81	88	169	7	
5 to 10	577	16	449	529	978	5 to 10	414	491	905	28	
10 to 15	247	4	240	248	488	10 to 15	225	269	494	7	
15 to 20	87	2	70	98	168	15 to 20	69	76	145	2	
20 to 25	31	1	23	32	55	20 to 25	22	39	61	1	
25 to 30	12	1	17	18	35	25 to 30	8	23	31	1	
30 to 35	4	...	6	17	23	30 to 35	9	11	20	1	
35 to 40	4	1	1	6	7	35 to 40	2	3	5	...	
40 to 45	...	...	1	4	5	40 to 45	1	2	3	...
45 to 50	...	...	1	...	1	45 to 50	...	1	1	...
50 to 55	...	...	1	...	1	50 to 55	...	1	1	...
55 to 60	...	...	1	...	1	55 to 60	...	...	...	...
And upwards	...	...	...	...	...	And upwards	...	...	...	...
Totals...	1,427	109 ¹¹	1,133	1,256	2,389	Totals	999	1,149	2,148	107	
EASTERN HOSPITAL.				NORTH-WESTERN HOSPITAL.				SOUTH-EASTERN HOSPITAL.			
AGES.	MALES.		FEMALES.		TOTAL.	AGES.	MALES.		FEMALES.		TOTAL.
	Admitted.	Died.	Admitted.	Died.			Admitted.	Died.	Admitted.	Died.	
Under 1	6	19	9	23	32	Under 1	10	6	16	2	
1 to 2	4	31	23	23	46	1 to 2	37	40	77	17	
2 to 3	6	41	40	40	86	2 to 3	76	84	160	30	
3 to 4	7	39	93	93	167	3 to 4	107	131	238	31	
4 to 5	4	34	93	93	186	4 to 5	117	148	265	36	
5 to 10	3	353	446	446	799	5 to 10	586	630	1,216	40	
10 to 15	2	140	210	210	350	10 to 15	294	271	565	4	
15 to 20	...	42	68	68	110	15 to 20	118	81	199	2	
20 to 25	...	31	42	42	73	20 to 25	46	43	89	...	
25 to 30	...	9	23	23	32	25 to 30	13	23	36	...	
30 to 35	...	4	12	12	16	30 to 35	8	6	14	...	
35 to 40	...	3	4	4	7	35 to 40	7	2	9	1	
40 to 45	...	...	...	...	...	40 to 45	2	4	6	...
45 to 50	...	...	...	...	...	45 to 50	...	2	2	...
50 to 55	...	...	...	...	...	50 to 55	...	...	...	...
55 to 60	...	...	...	...	...	55 to 60	...	...	...	...
And upwards	...	...	...	...	...	And upwards	...	...	...	...
Totals...	807	828	1,072	1,256	1,900	Totals...	1,421	1,471	2,892	163	

GORE FARM HOSPITAL.

AGES.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1
1 to 2	1	...	1
2 to 3	1	...	1
3 to 4	2	...	2
4 to 5	1	...	1
5 to 10	5	...	5
10 to 15	4	...	4
15 to 20
20 to 25	2	...	2
25 to 30
30 to 35
35 to 40
40 to 45
45 to 50
50 to 55
55 to 60
And upwards
Totals	...	12	...	14	...	26*

NORTHERN HOSPITAL.

AGES.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1
1 to 2
2 to 3
3 to 4	...	5	...	10	...	10
4 to 5	1	4	...	6	...	6
5 to 10	...	11	...	16	...	16
10 to 15	...	2	1	3	...	3
15 to 20
20 to 25
25 to 30	1	...	1
30 to 35
35 to 40
40 to 45
45 to 50
50 to 55
55 to 60
And upwards
Totals	1	22	1	14	2	36*

SUMMARY.

AGES.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 1	...	20	58	20	122	40
1 to 2	...	42	181	51	370	93
2 to 3	...	68	344	73	696	141
3 to 4	...	90	545	87	1,062	177
4 to 5	...	71	648	53	1,247	124
5 to 10	...	101	2,936	101	5,471	202
10 to 15	...	18	1,349	17	2,588	35
15 to 20	...	7	427	7	835	14
20 to 25	...	1	200	2	362	3
25 to 30	...	2	112	3	176	5
30 to 35	55	3	90	3
35 to 40	...	2	22	...	39	2
40 to 45	19	...	23	...
45 to 50	4	...	5	...
50 to 55	1	...	3	...
55 to 60	1	...	2	...
And upwards	2	...	2	...
Grand Totals	...	422	6,905	417	13,093	839

The small figures in the Eastern Hospital Table show the number of cases which died of Measles, Diphtheria, and other diseases (see Medical Superintendent's Report, p.). * Transferred cases.

COMPLICATIONS.	NUMBER OF CASES AT EACH HOSPITAL.								SUMMARY.
	Eastern Hospitals.	North-Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospitals.	South-Eastern Hospital.	Northern Hospital.	Gore Farm Hospital.	
Tuberculosis...	5	...	...	1	...	...	...	...	6
Enteric Fever	...	...	...	...	...	...	...	...	1
Measles	59	2	38	19	16	71	1	27	260
Epidemic Rose Rash	25	4	34	2	19	6	4	21	50
Chickei-pox...	25	...	...	39	9	...	42	...	180
Influenza	...	...	...	...	...	...	1	...	1
Whooping Cough	13	...	23	11	5	24	9	9	94
Smallpox	...	...	1	...	...	...	...	...	1
Diphtheria	...	...	...	22	18	...	47	71	158
Diphtheria during convalescence...	23	...	...	...	...	15	...	...	38
Diphtheritic condition of fauces	...	...	169	...	...	...	...	...	169
Diphtheritic condition of fauces on admission	55	...	...	...	...	...	...	...	55
Septicæmia	...	...	...	...	...	...	1	...	1
Croup	19	...	40	...	...	...	...	...	59
Purpura	1	...	...	...	...	...	...	...	1
Pyæmia	...	...	3	16	2	...	...	...	22
Hyperpyrexia	...	1	1	...	...	1	...	...	2
Hæmaglobinuria	...	...	1	...	...	...	...	...	1
Gonorrhœa	...	...	...	...	...	...	...	...	1
Gangrene of Fauces	8	...	...	...	...	...	...	...	8
" of Lung...	...	...	...	...	...	...	...	1	1
" Multiple	...	...	...	...	...	...	...	...	1
Neuritis, Multiple	...	...	...	...	...	...	...	...	1
Ulcer of Leg	...	...	...	...	...	...	...	...	1
Ulceration of Tongue	2	...	...	...	...	...	...	...	2
Erysipelas	2	...	7	...	...	2	4	2	17
Rheumatism	40	18	67	45	115	68	18	10	381
Meningitis	2	...	5	2	...	7	...	1	17
Delirium	...	1	...	...	...	...	...	...	1
" Tremens	...	...	2	...	...	1	...	...	3
Acute Mania	...	...	...	...	...	1	...	...	1
Paralysis	...	1	...	2	...	...	...	...	3
" Facial	...	...	2	...	...	3	...	...	5
" of Vocal Cords	...	...	...	...	...	1	...	...	1
" Infantile	...	...	...	...	...	1	...	...	1
" Palate Paralysis	...	...	12	...	...	...	...	...	12
" destructive ulceration of	7	...	51	...	...	8	...	...	66
Convulsions	4	1	4	...	...	4	...	...	13
Epilepsy	...	1	2	...	...	...	...	...	3

COMPLICATIONS.	NUMBER OF CASES AT EACH HOSPITAL.								SUMMARY.
	Eastern Hospitals.	North-Eastern Hospital.	North-Western Hospital.	Western Hospitals.	South-Western Hospitals.	South-Eastern Hospital.	Northern Hospital.	Gore Farm Hospital.	
Brought forward	455	68	576	301	257	342	232	201	2,432
Œsophageal Fistula, "after Bull-neck"	...	...	1	...	...	...	...	...	1
Mumps	5	...	2	1	...	1	1	...	10
Tonsillitis	...	...	...	32	30	3	99	96	260
" Secondary	27	...	11	...	...	2	...	...	38
Hæmorrhage from Tonsils...	...	...	...	...	...	3	...	...	2
" Secondary, from Neck	...	...	...	...	...	...	...	...	3
Quinsy	...	...	1	...	...	...	...	...	1
Pharyngitis, acute	...	...	...	...	...	1	...	...	1
Ulcer of Pharynx	...	1	...	...	...	...	...	...	1
"	...	...	...	...	...	...	...	...	1
Diarrhoea	26	...	...	...	...	...	...	...	26
Jaundice	2	...	...	...	...	...	...	...	10
Albuminuria...	353	...	135	785	73	3	5	...	1,470
Acute Nephritis	157	10	63	64	68	53	13	3	431
Uræmic Convulsions	4	...	4	...	...	3	...	...	11
Suppression of Urine	2	1	2	...	...	...	...	...	5
Recto-vaginal Fistula—Operation	...	1	...	...	...	...	...	...	1
Vaginitis	...	1	...	...	...	...	4	...	173
Cellulitis	...	1	...	...	...	168	...	...	1
" Orbital	...	...	...	...	...	...	...	...	1
" of Hand	1	...	...	...	...	1	...	...	1
" of Leg	2	...	...	...	...	...	...	...	1
" Cervical	17	...	...	...	...	19	...	...	2
Rhinitis	326	14	16	11	...	...	...	...	63
Otitis	224	28	234	205	206	105	5	...	889
Adenitis	280	...	282	200	191	270	39	30	1,279
Secondary Adenitis	...	...	267	193	...	76	...	...	1,007
Suppurating "	64	10	54	23	...	56	13	10	120
Periostitis	...	...	...	...	...	1	...	...	230
" of Upper Jaw	1	...	...	...	...	...	...	...	1
" Acute Suppurative Arthritis	1	...	...	...	...	...	...	...	1
Morbus Coxæ	...	...	2	...	...	...	...	...	2
Osteomyelitis	...	...	1	...	...	...	...	...	1
Fractured Femur	...	...	1	...	...	...	...	...	1
Morbus Cordis	...	...	...	...	...	4	...	...	4
Miliary Tuberculosis	...	...	1	...	...	...	...	...	1
Thrombosis of Lateral Sinus	...	...	...	...	...	1	...	...	1
Icterus	...	...	10	7	...	...	...	...	17

EASTERN HOSPITAL.				NORTH-WESTERN HOSPITAL.			
AGES.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	
Under 1	9	7	7	6	16	13	
1 to 2	15	12	20	15	35	27	
2 to 3	26	17	20	13	46	30	
3 to 4	24	15	37	18	61	33	
4 to 5	37	13	46	26	83	39	
5 to 10	84	23	98	26	182	49	
10 to 15	18	2	32	1	50	3	
15 to 20	12	1	27	1	39	2	
20 to 25	5	...	14	...	19	...	
25 to 30	4	...	7	...	11	...	
30 to 35	1	...	6	...	7	...	
35 to 40	2	...	2	...	4	1	
40 to 45	1	...	...	...	1	...
45 to 50	...	...	...	...	...	...
50 to 55	...	...	2	1	2	1
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals	238	91	318	107	556	198	

WESTERN HOSPITAL.				SOUTH-WESTERN HOSPITAL.			
AGES.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	
Under 1	4	1	3	2	7	3	
1 to 2	3	3	6	2	9	5	
2 to 3	5	5	10	4	15	9	
3 to 4	12	6	14	6	26	12	
4 to 5	14	4	20	14	34	18	
5 to 10	38	12	52	15	90	27	
10 to 15	9	1	12	1	21	2	
15 to 20	3	...	5	...	8	...	
20 to 25	6	...	14	1	20	1	
25 to 30	2	...	6	...	8	...	
30 to 35	1	...	2	...	3	...	
35 to 40	1	...	3	1	4	1	
40 to 45	...	...	1	...	1	...
45 to 50	...	...	1	...	1	...
50 to 55	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...
Totals	98	32	149	46	247	78	

NORTH-WESTERN HOSPITAL.				SOUTH-WESTERN HOSPITAL.			
AGES.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	
Under 1	10	1	8	6	18	7	
1 to 2	13	9	14	2	27	11	
2 to 3	22	9	25	9	47	18	
3 to 4	31	11	27	15	58	26	
4 to 5	29	11	38	14	67	25	
5 to 10	91	16	111	26	202	42	
10 to 15	21	2	41	1	62	3	
15 to 20	24	1	44	1	68	2	
20 to 25	17	...	26	...	43	...	
25 to 30	5	1	19	1	24	2	
30 to 35	6	...	10	1	16	1	
35 to 40	...	...	4	...	4	...
40 to 45	2	...	6	...	8	...	
45 to 50	1	...	1	...	2	...	
50 to 55	...	...	...	...	...	...
55 to 60	...	...	1	...	1	...
And upwards...	...	...	1	1	1	1
Totals	272	61	376	77	648	188	

WESTERN HOSPITAL.				SOUTH-WESTERN HOSPITAL.			
AGES.	MALES.		FEMALES.		TOTAL.		
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	
Under 1	2	2	2	2	4	4	
1 to 2	11	5	11	4	22	9	
2 to 3	14	7	21	13	35	20	
3 to 4	18	9	15	5	33	14	
4 to 5	14	4	25	8	39	12	
5 to 10	66	13	52	11	118	24	
10 to 15	31	3	31	3	62	6	
15 to 20	19	...	21	...	40	...	
20 to 25	16	1	19	1	35	2	
25 to 30	6	1	8	1	14	2	
30 to 35	4	...	3	...	7	...	
35 to 40	2	...	1	...	3	...	
40 to 45	1	...	2	...	3	...	
45 to 50	1	...	1	...	2	...	
50 to 55	1	...	1	...	2	...	
55 to 60	...	...	...	...	...	...
And upwards...	...	...	1	...	1	...
Totals	206	45	214	48	420	93	

COMPLICATIONS.	NUMBER OF CASES.						Total
	Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospital.	South-Eastern Hospital.	Northern Hospital.	
Chickenpox	2	11	3	...	1	...	17
Scarlet Fever ... ..	...	3	...	...	8	...	11
Measles	11	5	...	...	...	...	16
Croup	34	64	...	...	...	...	98
" with tracheotomy	74	...	...	...	...	...	74
Whooping Cough	2	8	3	...	...	...	13
Diphtheria of Vulva ... ..	...	2	...	...	...	...	2
" labial ... ..	...	2	...	...	...	...	2
Erysipelas... ..	...	1	...	...	...	...	1
Syphilis ... ..	...	2	...	...	...	...	2
Pyæmia ... ..	...	...	1	...	...	...	1
Rheumatism ... ..	...	...	...	5	...	1	6
Purpura ... ..	...	2	...	...	...	...	2
Paralysis, general ... ..	...	...	7	...	...	4	11
" of larynx... ..	...	...	...	...	2	...	2
" oculo	1	...	...	...	...	...	1
" of visual accommodation ... ..	...	...	2	...	3	...	5
" of respiratory muscles	1	2	...	...	...	...	3
" of palate	8	60	27	...	9	...	104
" ciliary	17	...	...	...	...	...	17
" , and of palate	13	...	...	...	...	...	13
" , and of palate and legs... ..	3	...	...	...	...	...	3
" , and of palate and eye and legs	1	...	...	...	...	...	1
" , and of palate and eye	2	...	...	...	...	...	2
" , and of palate, legs and intercostal	1	...	...	...	...	...	1
" , and limbs	1	...	...	...	...	...	1
" laryngeal, palate & limbs	1	...	...	...	...	...	1
" palate and legs	5	...	...	...	...	...	5
" , and back	1	...	...	...	...	...	1
" of legs	4	...	...	...	...	...	4
" of muscles of accommodation ... ..	...	11	...	...	2	...	13
" of muscles of deglutition ... ..	...	3	...	...	...	...	3
" facial ... ..	...	1	...	...	...	...	1
" universal... ..	7	...	...	...	...	...	7
" of lower extremities ... ..	...	13	...	...	4	...	17
" various ... ..	...	...	...	43	2	...	45
Convulsions	6	...	...	...	...	...	6
Epilepsy ... ..	...	2	...	...	...	...	2
Strabismus (Squint) ... ..	...	21	...	...	...	...	21
Cerebral embolism	1	...	...	...	...	...	1
Epistaxis	21	11	8	5	3	...	48
Hæmorrhage from mucous membrane	3	...	...	...	...	...	3
Otitis	25	...	14	...	...	...	39
Otorrhœa ... ..	...	45	...	29	...	...	74
Rhinitis	108	80	48	...	...	...	236
" membranous ... ..	...	...	3	...	...	...	3
Rhinorrhœa ... ..	...	...	...	40	...	...	40
Phlyctenular conjunctivitis	1	...	...	...	...	...	1
Ophthalmia ... ..	...	...	1	...	...	...	1
Tonsillitis ... ..	...	...	...	7	...	1	8
Hæmorrhage from Tonsils ... ..	...	...	...	...	1	...	1
Mumps	1	...	...	...	...	...	1
Cervical Abscess	9	...	...	...	...	...	9
" cellulitis	1	...	2	...	1	...	4
" lymphadenitis	13	...	...	...	...	...	13
Adenitis, primary ... ..	...	42	48	28	...	...	118
" suppurative ... ..	...	...	5	...	...	...	5
Cardiac failure ... ..	...	22	...	...	...	...	22
" dilatation	1	...	...	...	...	...	1
Carried forward	379	413	172	157	36	6	1,163

COMPLICATIONS.	NUMBER OF CASES.						Totals.
	Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospital	South-Eastern Hospital.	Northern Hospital.	
Brought forward	379	413	172	157	36	6	1,163
Pericarditis	1	1	..	..	..	..	2
Endocarditis	1	..	..	..	..	..	1
Mania ... ..	..	1	..	..	..	..	1
Bronchitis... ..	5	..	..	..	..	..	5
Broncho-pneumonia	9	17	4	..	..	..	30
Pneumonia	1	..	4	..	..	..	5
Empyema	2	..	..	..	..	..	2
Stomatitis ... ..	..	..	..	..	..	..	..
„ ulcerative ... ..	..	..	2	..	1	..	3
Cancrum oris	1	..	..	..	..	..	1
Albuminuria	148	139	117	106	1	1	512
Nephritis	43	5	2	..	..	1	51
Suppression of Urine	8	3	..	..	..	..	11
Uræmia	1	..	..	..	..	..	1
„ with convulsions	2	1	..	..	..	..	3
Cystitis	1	..	..	..	..	..	1
Diarrhœa	2	..	..	..	..	..	2
Herpes ... ..	..	9	..	..	..	..	9
„ labialis	2	..	..	..	..	..	2
Nettle-rash	1	..	..	..	..	..	1
Eczema ... ..	..	2	..	5	..	..	7
Erythema	1	..	..	..	..	..	1
Ringworm... ..	..	4	..	..	..	..	4
Ulceration of small intestine... ..	1	..	..	..	..	..	1
Abscesses ... ..	..	16	..	..	..	..	16
„ multiple	1	..	..	..	..	..	1
Abscess over mastoid ... ..	..	2	..	..	..	..	2
Relapse of Disease	9	..	2	..	1	..	12
Intubation... ..	2	..	..	..	..	..	2
Totals	621	613	303	268	39	8	1,852

EASTERN HOSPITAL.				NORTH-WESTERN HOSPITAL.			
AGES.	MALES.		TOTAL.	AGES.	MALES.		TOTAL.
	Admitted.	Died.			Admitted.	Died.	
Under 5	2	...	4	Under 5	3	...	5
5 to 10	11	1	21	5 to 10	2	...	7
10 to 15	17	2	38	10 to 15	7	...	17
15 to 20	24	...	40	15 to 20	7	...	12
20 to 25	11	2	18	20 to 25	8	1	14
25 to 30	7	1	16	25 to 30	6	2	12
30 to 35	3	1	6	30 to 35	3	...	12
35 to 40	4	1	7	35 to 40	1	1	8
40 to 45	...	...	4	40 to 45	1	...	3
45 to 50	1	1	2	45 to 50	1	1	2
50 to 55	...	...	1	50 to 55	...	...	1
55 to 60	...	...	...	55 to 60	...	1	...
And upwards	...	...	...	And upwards	...	...	...
Totals	80	8	157	Totals	39	6	82
			21				14
			13				8

WESTERN HOSPITAL.				NORTH-EASTERN HOSPITAL.			
AGES.	MALES.		TOTAL.	AGES.	MALES.		TOTAL.
	Admitted.	Died.			Admitted.	Died.	
Under 5	...	...	...	Under 5	...	...	...
5 to 10	2	1	3	5 to 10	...	...	...
10 to 15	7	3	10	10 to 15	...	...	...
15 to 20	7	...	7	15 to 20	...	...	...
20 to 25	8	...	8	20 to 25	...	...	...
25 to 30	6	1	7	25 to 30	...	...	...
30 to 35	3	1	4	30 to 35	...	...	...
35 to 40	1	1	2	35 to 40	...	...	...
40 to 45	1	...	1	40 to 45	...	...	...
45 to 50	1	1	2	45 to 50	...	...	...
50 to 55	...	...	1	50 to 55	...	...	...
55 to 60	...	...	...	55 to 60	...	...	...
And upwards	...	...	...	And upwards	...	...	...
Totals	14	1	15	Totals	14	1	15

SOUTH-EASTERN HOSPITAL.

AGES.	SOUTH-WESTERN HOSPITAL.					SOUTH-EASTERN HOSPITAL.				
	Admitted.	Died.	Admitted.	Died.	Totals	Admitted.	Died.	Admitted.	Died.	Totals
Under 5	9	1	1	5	15	1	...	1	...	35
5 to 10	17	2	2	...	91	6	...	9	...	10
10 to 15	17	...	...	...	5	9	...	6	...	37
15 to 20	15	...	...	...	...	8	...	9	...	10
20 to 25	17	...	...	...	...	3	...	4	...	54
25 to 30	4	1	1	...	...	4	...	2	...	...
30 to 35	5	...	...	...	...	1	...	1	...	...
35 to 40	2	...	...	...	...	1	...	1	...	...
40 to 45	3	...	...	...	...	2	...	1	...	...
45 to 50	1	...	...	...	...	1	...	...	...	...
50 to 55	1	...	...	...	...	...	...	...	...	...
55 to 60	...	...	...	...	...	...	...	...	...	...
And upwards...	...	...	...	...	...	...	...	...	...	...
Totals	91	5	37	10	54	15	91	37	10	62
Totals	...	...	...	...	...	...	...	...	...	13

SOUTH-WESTERN HOSPITAL.

AGES.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
Under 5	9	...	11	1	20	1
5 to 10	29	3	36	5	65	8
10 to 15	46	5	49	5	95	10
15 to 20	45	6	37	5	82	11
20 to 25	46	10	21	3	67	13
25 to 30	19	4	19	2	38	6
30 to 35	11	3	16	3	27	6
35 to 40	9	1	8	3	17	4
40 to 45	3	1	7	1	10	2
45 to 50	2	2	2	...	4	2
50 to 55	3	...	1	1	4	1
55 to 60	...	...	1	1	1	1
And upwards...	...	...	...	...	...	...
Grand Totals	222	35	208	30	430	65

SUMMARY.

COMPLICATIONS.	NUMBER OF CASES.						Total
	Eastern Hospital.	North-Western Hospital.	Western Hospital.	South-Western Hospital.	South-Eastern Hospital.	Northern Hospital.	
Diphtheria	1	1	...	...	...	...	2
Scarlet Fever ... ..	...	1	...	...	...	...	1
Hyperpyrexia	2	...	...	...	...	...	2
Rheumatism ... ..	...	...	...	...	1	...	1
Meningitis ... ..	...	1	...	...	...	...	1
Amentia ... ..	...	...	...	...	1	...	1
Dementia... ..	...	1	...	2	...	...	3
Mania, Acute	1	...	...	...	...	...	1
Septicæmia ... ..	...	1	...	...	...	...	1
Pyæmia ... ..	...	...	...	...	1	...	1
Phlebitis ... ..	...	...	...	3	...	...	3
Laryngitis	1	...	...	...	...	...	1
Bronchitis... ..	19	2	...	11	1	...	33
Broncho-pneumonia ... ..	...	17	...	...	...	...	17
Pneumonia	1	...	...	4	2	...	7
Phthisis ... ..	...	1	...	...	...	...	1
Pleurisy, with effusion ... ..	...	2	...	...	...	...	2
Stomatitis... ..	...	1	...	...	...	...	1
Aphthous condition of mouth ... ..	...	2	...	...	...	...	2
Parotitis	1	1	1	...	...	...	3
Adenitis ... ..	...	...	...	...	1	...	1
Otitis... ..	4	...	1	...	...	...	5
„ mastoid disease and Meningitis	1	...	...	...	...	...	1
Otorrhœa ... ..	...	1	...	...	1	...	2
Tonsillitis ... ..	...	...	1	...	...	...	1
Membranous exudation on fauces	...	...	...	...	2	...	2
Ulceration of vocal cords ... ..	...	...	...	...	1	...	1
Cervical lymphadenitis	1	...	...	...	...	...	1
Keratitis ... ..	...	1	...	...	...	...	1
Morbus Cordis... ..	...	...	1	...	...	...	1
Vaginitis ... ..	...	...	1	...	...	...	1
Hæmorrhage	11	9	1	10	3	...	34
Perforation ... ..	...	1	...	...	...	...	1
„ and Peritonitis	4	...	...	3	...	...	7
Peritonitis	3	1	...	...	2	...	6
Albuminuria	12	...	11	8	...	...	31
Nephritis	2	...	1	...	...	...	3
Bright's Disease ... ..	...	1	...	...	...	...	1
Retention of Urine... ..	...	4	...	...	1	...	5
Hæmaturia	2	...	...	...	...	...	2
Periostitis... ..	...	...	1	1	...	...	2
„ of Tibia, &c... ..	3	...	...	...	...	...	3
Thrombosis of femoral vein... ..	1	2	...	...	...	...	3
Furunculi... ..	...	7	...	...	...	...	7
Abscesses or Boils ... ..	...	...	3	6	...	...	9
„ Sub-cutaneous ... ..	...	...	...	...	3	...	3
„ of Axilla	1	...	...	...	...	...	1
„ of Arm... ..	1	...	...	...	...	...	1
„ of Scalp	1	...	...	...	...	...	1
Pregnancy	1	1	...	...	...	...	2
Bedsore ... ..	...	3	...	...	1	...	4
Relapse of Disease	17	14	8	7	3	...	49
Totals	91	76	30	55	24	...	276

FEVER STATISTICS.—TABLE VIII.—*Typhus Fever Admissions and Deaths* 101
at various ages during 1892.

AGES.	MALES.		FEMALES.		TOTAL.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.
EASTERN, WESTERN, AND SOUTH-WESTERN HOSPITALS.						
Under 5	1	...	...	...	1	...
5 to 10 ... ..	...	...	...	...	...	...
10 to 15 ... ..	...	...	1	...	1	...
15 to 20	1	...	1	...	2	...
20 to 25	4	1	3	...	7	1
25 to 30	1	1	1	...	2	1
30 to 35 ... ..	...	...	...	...	...	...
35 to 40	1	...	2	...	3	...
40 to 45 ... ..	...	...	1	...	1	...
45 to 50 ... ..	...	...	1	...	1	...
50 to 55 ... ..	...	...	...	...	...	...
55 to 60 ... ..	...	..	..	...	...	...
And upwards	1	..	..	...	1	...
Totals	9	2	10	...	19	2

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Scarlet Fever		Smallpox ... ..	...	...	...	...
„		Whooping-cough	1	1	...	...
„		Measles... ..	23	2	3	...
„		Diphtheria ... ..	...	...	...	...
„		„ and Measles ... ..	...	...	...	...
„		Enteric Fever ... ..	...	...	...	...
„		Epidemic Rose-rash	10	...	...	...
„		Chicken-pox	2	...	...	...
„		Pyrexia... ..	4	...	...	...
„		Febricula ... ..	...	...	1	...
„		Influenza	1	...	...	...
„		Septicæmia	1	...	...	...
„		Puerperal Septicæmia ... ..	...	...	...	...
„		„ Mania... ..	...	...	...	...
„		Erysipelas ... ..	...	...	...	...
„		Purpura ... ..	...	...	...	...
„		Pyæmia ... ..	...	...	...	...
„		Vaccinia ... ..	...	...	...	...
„		Acute Rheumatism	2	...	...	...
„		Bronchitis	2	...	1	1
„		Broncho-pneumonia	5	...	...	...
„		Pneumonia	9	...	...	...
„		„ and Phthisis	1	...	...	...
„		Pleurisy ... ..	...	...	...	...
„		Tuberculosis	1	1	...	...
„		Tubercular Peritonitis ... ..	...	...	...	...
„		Meningitis ... ..	...	...	...	...
„		Stomatitis, and Tonsillitis	1	...	...	...
„		Pharyngitis	2	...	...	...
„		Laryngitis	1	1	...	...
„		Tonsillitis	7	...	...	...
„		„ Follicular	3	...	...	...
„		Empyema	1	...	...	...
„		Obstruction to superior vena cava	1	...	...	...
„		Ulcerative Endocarditis ... ..	...	...	...	...
„		Otitis	1	...	...	...
„		Rhinitis	1	...	...	...
„		Ulceration of Soft Palate	1	...	...	...
„		Nephritis	4	1	...	...
„		Albuminuria	3	...	...	...
„		Erythema ... ..	...	...	...	...
„		„ multiform	1	...	...	...
„		„ and burns ... ..	...	...	...	...
„		Strophulus	2	...	...	...
„	Lichen ... ..	...	...	...	...
„	Dermatitis, acute ... ..	...	...	...	...
„	„ foliative ... ..	...	...	...	...
„	Capaiba Rash ... ..	...	...	...	...
„	Nettle-rash	2	...	...	...
„	Eczema	2	...	...	...
„	Cellulitis of Leg	2	1	...	...
„	„ „ Head	1	1	...	...
„	Abscess of Upper Jaw	1	...	...	...
„	Cervical Abscess	2	1	...	...
„	Recurrent Œdema	1	...	...	...
„	Dentition	1	...	...	...
„	Burns ... ..	...	...	2	1	
„	Nil... ..	27	...	1	...	
Carried forward ...	295	...	130	9	8	2

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
2	2	...
...	1	1
9	3	9	3	25	6	19	10	88	24
...	*6	...	...	...	6	...
...	*1	...	...	...	1	...
...	1	...	...	...	1	...
...	...	16	...	6	...	1	...	33	...
...	1	...	3	...
...	9	...	4	...
...	1	...	...	...	10	...
...	2	...
...	1	...	...	...	1	...
...	1	1	...	...	1	1
...	1	...	...	...	1	...
...	1	1	1	1
...	...	1	1	...	...	...	...	1	1
...	1	...	...	...	1	...
...	2	...	4	...
...	2	1	...	...	5	2
...	1	1	6	1
...	...	1	...	2	...	...	...	12	...
...	1	...
...	2	...	2	...
...	1	...	...	...	2	1
...	1	1	1	1
...	1	1	1	1
...	1	...
...	2	...
...	1	1
...	17	...
...	†2	...	8	...	3	...
...	1	...
...	1	...
1	1	...	...	...	...	...	...	1	1
...	1	...
...	1	...
...	1	...
...	4	1
...	3	...
1	1	...	...	...	...	1	...	1	1
...	1	...
1	1	...	...	...	...	...	...	2	...
...	1	...	...	...	1	1
...	1	...	...	...	1	...
...	1	...	1	...	4	...
...	1	...	...	...	3	1
...	1	1	2	1
...	1	...
...	2	1
...	1	...	...	...	1	...
...	2	...
...	2	1
...	...	1	...	†6	...	4	...	39	...
15	6	28	4	60	8	54	15	295	44

* † See note on page 108.

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward ...	295	...	130	9	8	2
Diphtheria ...	}	Measles... ..	4	1	...	...
" ...		" with Croup	1	1	...	...
" ...		Scarlet Fever ... ..	...	...	...	...
" ...		Puerperal Septicæmia	1	1	...	...
" ...		Erysipelas ... ..	...	..	...	...
" ...		Meningitis ... ..	..	...	...	...
" ...		Acute Miliary Tuberculosis	1	1	...	...
" ...		Tuberculous Peritonitis	1	...	...	...
" ...		Empyema	1	...	...	...
" ...		Pericarditis ... ..	...	...	...	...
" ...		Laryngitis	2	...	...	...
" ...		Tonsillitis	53	...	...	...
" ...		" with acute Rheumatism	2	...	...	...
" ...		" chronic	1	...	...	...
" ...		" and Rhinitis	1	...	...	...
" ...		" and Eczema... ..	1	...	...	...
" ...		" herpes labialis	2	...	...	...
" ...		" Follicular	7	...	...	...
" ...		Bronchitis	1	1	...	...
" ...		Broncho-pneumonia	4	2	...	...
" ...		Pneumonia	2	1	...	...
" ...		Pleuro-pneumonia ... ..	...	...	...	...
" ...		Phthisis	2	...	...	...
" ...		Nephritis	1	...	...	...
" ...		" and Tonsillitis	2	...	...	...
" ...		Peritonitis ... ..	...	...	...	...
" ...		Stomatitis	2	...	...	...
" ...		Acute Necrosis of Femur	1	1	...	...
" ...		Rhinitis	1	...	...	...
" ...		Ulceration of Soft Palate	1	..	...	...
" ...		" Syphilitic	1	...	...	...
" ...		" " of Tonsil and Cellulitis	1	1	...	...
" ...		Syphilitic Ulceration of Fauces ... ..	...	...	...	...
" ...		Cervical Abscess... ..	1	...	...	...
" ...	" Cellulitis ... ..	...	...	...	...
" ...	Pharyngitis	11	...	...	...
" ...	Herpes ... ..	...	...	...	...
" ...	" labialis	1	...	...	...
" ...	Post-pharyngeal Abscess	1	1	..	...
" ...	Mastoid Abscess ... ..	...	...	...	...
" ...	Nil	5	...	..	...
Enteric Fever ...	249	...	116	11	...	...
" ...	}	Chickenpox ... ..	...	...	...	...
" ...		Scarlet Fever ... ..	...	...	...	...
" ...		Typhus " ... ..	...	...	...	...
" ...		Whooping-cough ... ..	...	...	...	...
" ...		Tuberculosis	2	2	...	...
" ...		Febricula	5	...	...	...
" ...		Rheumatism, acute ... ..	...	...	...	...
" ...		Influenza ... ..	...	...	...	...
" ...		Septicæmia	2	...	...	...
" ...		Pyæmia	1	1	...	...
" ...		Erysipelas	1	1	...	...
" ...		Cerebral Abscess ... ..	...	...	...	...
" ...		Meningitis	2	...	...	...
" ...		Tuberculous Meningitis	2	1	...	...
" ...		Acute Mania	1	...	...	...
Carried forward ...		Carried forward	16	5	...	...
Carried forward ...	597	...	262	25	8	2

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward ...	597	... ..	262	25	8	2
Enteric Fever (contd.) ...	53	Brought forward ...	16	5	...	...
" ...		Delirium Tremens ...	...	...	...	...
" ...		Cephalalgia ...	...	...	...	...
" ...		Perityphlitis ...	...	...	...	...
" ...		Morbus Cordis and Nephritis ...	1	1	...	...
" ...		Pericarditis ...	1	...	...	...
" ...		" and Peritonitis ...	...	...	...	...
" ...		Endocarditis... ..	...	...	...	...
" ...		Angina Pectoris ...	1	...	...	...
" ...		Bronchitis ...	1	...	...	...
" ...		Broncho-pneumonia ...	1	...	...	...
" ...		Pneumonia ...	16	5	...	...
" ...		" with Pleuritic Effusion	1	1	...	...
" ...		" " Empyema ...	...	...	...	...
" ...		Pleuro-pneumonia after fract. rib	1	...	...	...
" ...		Phthisis ...	2	1	...	...
" ...		Pulmonary Abscess ...	1	1	...	...
" ...		Tuberculosis, miliary... ..	...	...	...	...
" ...		Pleurisy ...	3	...	...	...
" ...		Pleuritic Effusion ...	...	...	...	...
" ...		Empyema ...	2	...	...	...
" ...		Tonsillitis ...	1	...	...	...
" ...		Dyspepsia ...	...	...	...	...
" ...		Diarrhœa ...	1	...	...	...
" ...		Diarrhœa and Erythema ...	1	...	...	...
" ...		Cystitis ...	...	...	...	...
" ...		Abscess of Liver... ..	1	1	...	...
" ...		Hepatitis and Peritonitis ...	...	...	...	...
" ...		Pylephlebitis ...	...	...	...	...
" ...		Peritonitis ...	3	3	...	...
" ...		" and Pleurisy ...	...	...	...	...
" ...		Nephritis ...	1	...	...	...
" ...		Kidney Disease ...	...	...	...	...
" ...		Bright's Disease ...	...	...	...	...
" ...		Alcoholism ...	...	...	...	...
" ...		Alcoholic Neuritis ...	1	1	...	...
" ...		Hysteria ...	...	...	...	...
" ...		Spinal Caries ...	...	...	...	...
" ...		Peri-nephritic Abscess ...	...	...	...	...
" ...		Chronic Renal Disease ...	...	...	...	...
" ...		Intestinal Catarrh ...	...	...	...	...
" ...		Ulcerative Colitis ...	2	2	...	...
" ...		Gastro-enteritis ...	...	...	...	...
" ...		Gonorrhœa ...	1	...	...	...
" ...		Parametritis... ..	...	...	...	...
" ...		Endometritis ...	1	...	...	...
" ...	Salpingitis ...	...	...	...	...
" ...	Ovarian Tumour... ..	...	...	...	...
" ...	Abdominal Tumour ...	...	...	...	...
" ...	" Pain ...	2	...	...	...
" ...	Acute Periostitis of Tibia ...	1	...	...	...
" ...	Periostitis of Lower Jaw ...	1	...	...	...
" ...	Suppurative Arthritis & Pyæmia	...	...	...	...
" ...	Otitis Media with Cerebral Abscess	...	...	...	...
" ...	Erythema Nodosum ...	1	...	...	...
" ...	Carcinoma of Sigmoid Flexure...	1	...	...	...
" ...	Constipation... ..	...	...	...	...
" ...	Chlorosis ...	1	...	...	...
" ...	Purpura ...	1	1	...	...
" ...	Typhlitis ...	...	...	...	...
" ...	Pelvic Hæmatocele ...	...	...	...	...
" ...	Lumbar Abscess ...	1	...	...	...
" ...	Nil... ..	3	...	...	...
	190		72	22	...	...
Carried forward... ..	734	... ..	318	42	8	2

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
26	9	82	10	96	12	123	30	597	88
9	1	5	3	8	3	15	5	53	17
...	1	...	1	...
...	1	...	1	...
...	2	1	...	...	2	1
...	1	1
...	1	1	...	...	2	1
...	1	1	1	1
...	...	1	1	...	...	3	1	4	2
...	1	...
1	...	1	...	1	1	1	...	5	1
...	1	...	2	...
5	1	4	...	7	1	12	5	44	12
...	1	1
...
...	1	...
1	1	...	...	...	...	1	...	4	2
...	1	1
...	1	1	1	1
...	1	...	...	...	4	...
...	...	3	...	...	...	...	...	3	...
...	2	...
...	...	1	...	...	...	...	...	2	...
...	1	...	1	...
...	...	3	...	1	...	...	...	5	...
...	1	...
...	1	...	...	...	1	...
...	1	1
1	1	...	...	...	...	...	...	1	1
...	1	1	...	...	1	1
...	1	1	3	4
...	1	1	1	1
...	1	...
...	1	1	...	1
1	1	1
...	1	...
...	1	...	1	1
...
...	1	...
...	1	1	...	...	1	1
...	1	...	1	...
...	1	...	...	...	2	...
...	1	...
...	1	...	1	...
...	1	1
...	1	...
...	1	...
...	1	...
...	1	1
1	1	...	...	...	...	1	1	1	1
...	1	...
...	...	1	...	1	...	...	...	5	...
23	7	21	6	28	9	46	18	190	62
40	15	98	13	116	18	154	43	734	133

Diseases as certified on admission.	Number of Cases.	Disease as diagnosed after admission.	EASTERN HOSPITAL.		NORTH-EASTERN HOSPITAL.	
			No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
Brought forward ...	734	... ..	318	42	8	2
Typhus Fever... ..	}	Measles... ..	...	...	...	...
"		Ulcerative Endocarditis and Purpura	1	1	...	...
"		Meningitis, Tuberculous	1	1	...	...
"		Pneumonia ... ..	...	...	...	...
"		Malignant Pustule ... ..	...	...	...	...
Gastric Fever	1	Erythema Nodosum	1	...	...	...
Continued Fever	1	Pneumonia & Chronic Nephritis	1	1	...	...
Smallpox or Scarlet Fever	1	Epidemic Rose-rash	1	...	...	...
Croup	1	Measles and Croup	1	...	...	...
Smallpox	}	Chicken-pox... ..	...	...	...	...
"		Erythema Papulatum ... ..	...	...	...	...
"		Pleuritic Effusion ... ..	...	...	...	...
"		Dermatitis herpetiformis	1	...	...	...
"		Eczema... ..	1	...	...	...
Relapsing Fever	1	Pneumonia and Nephritis... ..	1	1	...	...
No certificate	}	Acute Dermatitis	1	1	...	...
"		Erythema ... ..	...	...	...	...
Infants with mothers ...	}	... ..	...	...	...	...
Mothers with infants ...		... ..	...	...	1	...
Born in Hospital ... ..		... ..	...	...	...	...
Cases dying in 1892, but admitted in 1891 ...		... ..	...	1	...	...
GRAND TOTALS ...	753	... ..	328	48	9	2

SOUTH-WESTERN HOSPITAL.—The twenty cases marked thus (*) are in Table I., included under the headings of the diseases when sent into Hospital, subsequently developed Scarlet

NORTH-WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH-WESTERN HOSPITAL.		SOUTH-EASTERN HOSPITAL.		SUMMARY.	
No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.	No. of Cases.	No. of Deaths.
40	15	98	13	116	18	154	43	734	133
...	1	...	1	...
...	1	1
...	1	1
...	1	...	1	...
...	1	1	1	1
...	3	1	5	3
...	1	...
...	1	1
...	1	...
...	1	...
...	...	1	...	...	...	...	...	1	...
...	1	...	1	...
...	1	...	1	...
...	1	...
...	1	...
...	...	1	...	...	...	2	...	5	...
...	1	1
...	1	1
...
...	1	1
...
...
...	1
2	3	1
42	15	99	13	116	18	159	44	753	140

in which they actually suffered on admission ; and the eight negative cases marked thus (†), although wrongly diagnosed as such, and are included under that heading in Table I.



AGES.	CASES WITH PRIMARY VACCINATION CICATRIX OR CICATRICES PRESENT.																				Total Vaccinated Cases Admitted.	Deaths amongst Vaccinated Cases.				Cases in which there was "No evidence" as to Cicatrices. (See Note*)	Cases in which Vaccination was "absent."	
	AREA OF CICATRIX OR CICATRICES.																					Total Admissions.	Total Deaths.	Total Admissions.	Total Deaths.			
	Class A ¹ = half and upwards of one-half square inch total area.					Class A ² = one-third, but less than one-half square inch total area.					Class A ³ = less than one-third square inch total area.					Class A ⁴ = Areas not recorded.												
	Number of Scars.					Number of Scars.					Number of Scars.					Number of Scars.												
	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.								
Foveation of Scars.					Foveation of Scars.					Foveation of Scars.					Foveation of Scars.													
Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.									
Under 1 year ...																				1	1	3	1					
From 1 to 2 years ...																				1		1	1					
" 2 " 3 "																				1								
" 3 " 4 "																				1								
" 4 " 5 "			1																	1		1						
" 5 " 6 "																				2		1						
" 6 " 7 "																				5		1	2					
" 7 " 8 "			1																	2		1	2					
" 8 " 9 "																				1								
" 9 " 10 "																				3		1	1					
" 10 " 11 "																				3			2					
" 11 " 12 "		2																		2			2					
" 12 " 13 "		1																		1								
" 13 " 14 "			1																	2			1					
" 14 " 15 "		1		1																19		3	1					
" 15 " 20 "		1	2	1	1	2	1													17		1	2					
" 20 " 25 "		†3		1	1	2														10		2	1					
" 25 " 30 "		1		1		1														14		3	3					
" 30 " 35 "		1				†1														8		3	2					
" 35 " 40 "		1				†1														14	1	1	2					
" 40 " 50 "		†2		†1																3		1	3					
" 50 " 60 "		1																		1		1						
" 60 " 70 "																												
" 70 " 80 "																												
" 80 years and upwards ...																												
TOTAL ...	8	7	4	2	7	5	3	1	1	1	1	2	1	1	2	1	1	1	1	111	1	1	1	3	23	11	31	4

N.B.—The small figures indicate the number of Deaths in each sub-division of the Classes. * Note.—In this column are included cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also cases in which no statement was made but the nature of the eruption, or other cause, prevented any observation of the marks, if any existed. † Said to have been re-vaccinated. ‡ One said to have been re-vaccinated.

SMALLPOX STATISTICS.—TABLE IIb. (continued)—Showing the condition as regards Vaccination of FEMALE Patients admitted during 1892.

AGES.	CASES WITH PRIMARY VACCINATION CICATRIX OR CICATRICES PRESENT.																				Total Vaccinated Cases Admitted.	Deaths amongst Vaccinated Cases.		Cases in which there was "No evidence" as to Cicatrices. (See Note*)	Cases in which Vaccination Cicatrix was "absent."									
	AREA OF CICATRIX OR CICATRICES.																					Total Admissions.	Total Deaths.											
	Class A ¹ = half and upwards of one-half square inch total area.					Class A ² = one-third, but less than one-half square inch total area.					Class A ³ = less than one-third square inch total area.					Class A ⁴ = Areas not recorded.																		
	Number of Scars.					Number of Scars.					Number of Scars.					Number of Scars.																		
	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.														
Foveation of Scars.					Foveation of Scars.					Foveation of Scars.					Foveation of Scars.																			
Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.															
Under 1 year...																					...	...	4	3								
From 1 to 2 years...																					...	...	3	3								
" 2 " 3 "																					...	...	5	1								
" 3 " 4 "																					...	...	2	1								
" 4 " 5 "																					1	1	2	2										
" 5 " 6 "																					1	1	1	...										
" 6 " 7 "																					1	1	...	...								
" 7 " 8 "																					1	1	1	...										
" 8 " 9 "																					1	1	1	...										
" 9 " 10 "																					1	1	1	1										
" 10 " 11 "																					1	1	...	...								
" 11 " 12 "																					1	1	...	...								
" 12 " 13 "																					1	1	2	...										
" 13 " 14 "																					1	1	1	...										
" 14 " 15 "																					2	2	5	4										
" 15 " 20 "																					5	2	1	1										
" 20 " 25 "																					1	3	1	1										
" 25 " 30 "																					1	1	1	1										
" 30 " 35 "																					1	1	1	...										
" 35 " 40 "																					1	1	...	...								
" 40 " 50 "																					1	1	...	...								
" 50 " 60 "																					1	1	...	...								
" 60 " 70 "																					1	1	...	...								
" 70 " 80 "																					1	1	...	...								
" 80 years and upwards																					1	1	...	...								
TOTAL	10	5	5	2	9	1	3	1	2	1	6	2	3	5	1	1	4	2	7	1	2	2	8	4	3	2	3	1	1	107	17	2	31	13

N.B.—The small figures indicate the number of Deaths in each sub-division of the Classes.

† Said to have been re-vaccinated.

‡ One said to have been re-vaccinated.

* NOTE.—In this column are included cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also cases in which no statement was made, but the nature of the eruption, or other cause, prevented any observation of the marks, if any existed.

AGES	CASES WITH PRIMARY VACCINATION CICATRIX OR CICATRICES PRESENT.																				Total Vaccinated Cases Admitted.	Deaths amongst Vaccinated Cases.		Cases in which there was "No evidence" as to Cicatrices. (See Note*)	Cases in which Vaccination Cicatrix was "absent."			
	AREA OF CICATRIX OR CICATRICES.																					Total Admissions.	Total Deaths.					
	Class A ¹ = half and upwards of one-half square inch total area.					Class A ² = one-third, but less than one-half square inch total area.					Class A ³ = less than one-third square inch total area.					Class A ⁴ = Areas not recorded.												
	Number of Scars.					Number of Scars.					Number of Scars.					Number of Scars.												
	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.	Four or more.	Three.	Two.	One.	Not recorded.								
Foveation of Scars.					Foveation of Scars.					Foveation of Scars.					Foveation of Scars.													
Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.	Half and more than half foveated.	Less than half foveated.	Plain scars.	Not recorded.									
Under 1 year ...																					...	...	6	3
From 1 to 2 years	1	1	6	4			
" 2 " 3 "													1								1		6	2				
" 3 " 4 "														1							1		2	1				
" 4 " 5 "																					2	1	2	1				
" 5 " 6 "																					2	2	2	2				
" 6 " 7 "													1								3		2					
" 7 " 8 "	1	1	1							1				1							8	2	2					
" 8 " 9 "										1											3	1	3					
" 9 " 10 "											1	1									3		1					
" 10 " 11 "													1								3	1	2	1				
" 11 " 12 "	1	2																			7	1	2					
" 12 " 13 "		1											2								6		2					
" 13 " 14 "		1	1											1							4		2					
" 14 " 15 "	2	1									2										11		2					
" 15 " 20 "	6	4	2	2	5	1				2	1										44	2	8	1				
" 20 " 25 "	4	3	1	1	5	1	1			2	1										43	4	4	3				
" 25 " 30 "		1	1	1	2					1											18	3	1	8				
" 30 " 35 "	1									2											17	4	4					
" 35 " 40 "	1									1											13	6	2	1				
" 40 " 50 "	2	2								1											23	1	5	3				
" 50 " 60 "	1																				5	1	3	1				
" 60 " 70 "																					1							
" 70 " 80 "																												
" 80 years and upwards ...																												
TOTAL ...	18	12	9	4	16	6	3	3	1	1	2	2	2	1	1	4	2	2	4	2	218	1	1	3	40	13	62	17

N.B.—The small figures indicate the number of Deaths in each sub-division of the Classes.

* NOTE.—In this column are included cases stated to have been vaccinated, but bearing no visible evidence of the operation, and also cases in which no statement was made, but the nature of the eruption, or other cause, prevented any observation of the marks, if any existed

† Said to have been re-vaccinated.

‡ One said to have been re-vaccinated.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF
THE SEVERAL ASYLUMS FOR IMBECILES FOR 1892.

No. 10.

REPORT OF DR. H. CASE, MEDICAL SUPERINTENDENT OF THE
LEAVESDEN ASYLUM.

(For Statistics, see pp. 135 to 159.)

LEAVESDEN ASYLUM,
NEAR WATFORD, HERTS,
January, 1893.

To the Committee of Management.

GENTLEMEN,

Herewith I submit the usual Statistical Tables for the year 1892.

There remained in the Asylum on the 1st January, 1892, 872 males and 1,082 females—total, 1,954.

The following brief table shows the changes that have taken place during the year:—

	Males.	Females.	Total.
Admitted	181	150	331
Re-admitted	4	2	6
Discharged	37	25	62
Died	131	111	242
Remaining in the Asylum on the 31st December, 1892 ...	889	1,098	1,987

The total number under my care during the year was 1,057 males and 1,234 females.

My Committee are aware that, as I am writing, I am convalescing from severe illness. They will, therefore, I am sure, forgive me if I make but little comment on the work that has been done during the year. The statistics give every information to all interested in Asylum administration. All matters of importance have been duly reported, both at the fortnightly meetings and to the Sub-Committees, whose visits have regularly intervened.

With regard to the admissions, the number has been quite up to the average. As to the character of them there is nothing worthy of note—save that old age and infirmity comprise the chief part. We have received a goodly number direct from the county asylums, and, although they are chronic and incurable, yet they compare most favourably with those imported direct from the metropolitan parishes. One old lady, aged 102 years, is specially worthy of mention. She is bright-eyed, has a capital memory for past events, is able to leave her bed, reads, and at times pretends to do a little sewing. She was upset by the journey here from town, but rallied in a few days.

It is clearly not unattended with danger to send these poor, feeble creatures such a distance; and one cannot help feeling that a most humane object will have been achieved when the building spoken of by the Board of Management for the treatment of such is erected in or *near* London.

The number of discharges as recovered has been, I think, satisfactory, always bearing in mind the quality of the material with which we have to deal. Those improved, too—who have been handed over to the care of their friends, with consent of their respective guardians—compare favourably with previous years. We have been obliged to remove rather more than usual to County Asylums for treatment. These are labelled *unimproved*.

The death-rate, calculated on the daily average number resident, was 12·6 per cent., virtually the same as last year.

The causes of death in all cases have been natural.

We had a somewhat severe epidemic of Influenza in January and February, which chiefly affected the staff. A few of the patients were attacked, but all recovered.

But few accidents of any severity occurred; two or three fractures, unavoidably caused, were treated successfully.

The new Recreation Hall was opened by our Chairman, in the presence of the Committee, on Wednesday, October 26th.

The patients had a dance on the occasion, and were afterwards regaled with tea and cake.

Now that we have this necessary addition to our Asylum, we are enabled to give more frequent entertainments to our patients, and I am pleased to

say that members of our Committee and other friends have promised to bring down companies to perform.

New well-pumps have been substituted for those that have been continually at work since the opening of the Asylum; and two new high-pressure boilers have replaced those that have been in action a like period.

The sanitary condition of the Asylum is in every way satisfactory.

It remains but for me to thank my medical colleagues and the other officers for their cordial co-operation in my work; and to thank you, Mr. Chairman and Gentlemen, for your continued kind consideration and support.

I have the honour to be, Gentlemen,

Your obedient Servant,

(Signed)

H. CASE,

Medical Superintendent

No. 11.

REPORT OF DR. G. STANLEY ELLIOT, MEDICAL SUPERINTENDENT
OF THE CATERHAM ASYLUM.

(For Statistics, see pp. 135 to 159.)

CATERHAM ASYLUM,

CATERHAM, SURREY,

December 31st, 1892.

To the Committee of Management.

MADAM AND GENTLEMEN,

I have the honour to present to you my Annual Report upon the general condition of this Asylum for the year 1892, to which are appended the usual statistical details.

The numerical results of the year may be thus summarised:—

	Males.	Females.	Total.
On the 1st of January, 1892, the Asylum contained	937	1,064	2,001
There have been admitted during the year	103	115	218
The total number under treatment has been	1,040	1,179	2,219
Of this number there have been discharged	16	13	29
There have died	83	95	178
Remaining under treatment at the close of the year	941	1,071	2,012

The average number of patients resident during the year was 1,964.

The highest number resident on any one day was 2,015.

THE ADMISSIONS.

The admissions for the year number 218, namely 103 males and 115 females, or six in excess of the number received during the previous year. Of this number, 112 were cases of transfer from County or Private Asylums, in accordance with the provisions of the Lunacy Act, 1890.

I have again to lament the fact that very few indeed of the admitted patients are capable of being usefully occupied in any way, whilst their generally enfeebled condition has somewhat unduly strained our infirmary accommodation.

The Asylum Infirmary which the Board has decided to build within easy access of London will be the means of providing special accommodation for such patients. This step will soon tend to restore these District Asylums to the purpose for which they were originally constructed, viz., to provide accommodation for the comparatively able-bodied chronic insane and imbecile class, instead of gradually becoming huge infirmaries for bodily as well as mentally infirm persons.

I feel confident that this decision of the Board will be attended with the happiest results. The enfeebled and helpless patients will, in addition to having the benefit of being located in specially equipped and constructed wards suitable to their infirm condition, be spared a trying and exhausting journey of some 20 miles to these Asylums, whilst, moreover, their relatives will be enabled to visit them more frequently and without losing a day's work, which in too many cases they have been utterly unable to do, and this consequent deprivation of such desirable visits has been keenly felt both by patients and their near relatives.

THE DISCHARGES.

Four males and two females are recorded as having been discharged recovered, and when it is taken into account that only chronic and incurable patients of long standing are supposed to be sent to this Asylum, the small number referred to is easily explained.

Eight patients left the Asylum as improved, and five males and eight females were transferred, as being either dangerous to themselves or others, to a County Asylum.

These cases were, in accordance with the amended Lunacy Act of 1890, recertified previous to their removal by a Justice of the Peace and an outside medical practitioner. One man was discharged as not having exhibited any evidence of insanity during his 12 days' residence under observation here.

He was the subject of severe attacks of epilepsy, and had several years previously been under care for mental disorder at the Surrey County Asylum.

THE DEATHS.

The mortality for the year shows a percentage of nine on the average numbers resident, and it is noteworthy that more than a quarter of the deaths were upwards of 70 years of age at the time of their decease. An inquest was held in April on a female patient who had been subject to frequent epileptic attacks, and died from accidental suffocation occasioned by turning on her face during the night whilst in an epileptic fit, and a verdict to this effect was returned.

GENERAL HISTORY.

During the early months of the year there was an exceptional increase of sickness and mortality amongst our population, many of the patients and several members of the staff being prostrated by the prevailing epidemic of Influenza; but after that period the general health of the community was good.

Operations were performed on two patients, one in the case of a female who was suffering from extensive and advancing scrofulous disease of the elbow joint, rendering amputation of the arm necessary; and the second on a male patient who was the subject of a malignant tumor of the right foot, necessitating amputation at the ankle. It is satisfactory to be able to add that both cases made a good recovery.

The Commissioners in Lunacy paid their periodical visit of inspection during the month of May, and made an entry in the Visitors' Book expressing a generally favourable opinion of the condition of the Asylum. The usual visits have also been paid by the Local Government Board Inspectors.

The occupation of the patients has received the attention it deserves as conducing to their health and contentment, in addition to materially affecting the economic management of the Asylum; but I regret to have to add that the number capable of being usefully engaged is gradually becoming more limited, in consequence of the generally helpless character of the fresh admissions.

It is satisfactory to be able to again record that there has been no occasion to resort to mechanical restraint in the treatment of the patients during the past year.

The usual variety of entertainments have been given to the patients, consisting of theatrical performances by members of the staff, concerts which have been given by kind friends who have specially journeyed from London for this purpose, magic lantern exhibitions, and the regular weekly combined entertainment of dancing and music. There can be no manner of doubt as to the beneficial effect of such recreations, tending as they do to a feeling of cheerfulness and contentment amongst the patients, and thus rendering their necessarily enforced detention in the Asylum less irksome and monotonous.

An accident of a, fortunately, most exceptional character occurred during the unprecedentedly heavy thunderstorm which visited the country on the night of the 28th June, and that might have been followed by serious consequences, but happily was attended by no such result. The Asylum was suddenly plunged into darkness at about 10 p.m., owing to the gas main at the works becoming flooded, as the result of the heavy downpour of rain. I instantly summoned a batch of the artisans to our assistance, and by

1.30 a.m. the water was entirely pumped out so that the gas was again available. It is worthy of note that the rain-water gauge gave a reading of 2.45 inches of rain which had fallen within the brief period of three hours. Nothing approaching such a downfall has ever been recorded here. A new storm drain, 150 yards in length, has since been laid to take the surface water from the roads and male airing courts, so as to prevent the possibility of a similar flooding again occurring in the vicinity of the gas works.

The decision of the Committee to at once remove and replace the remainder of the objectionable lead **D** traps of the water-closets with stoneware **S** traps, new pans, and 2-gallon cisterns of recent and approved make, is, in my opinion, a most desirable step.

I am also glad that the Committee have determined to increase the water storage of the Asylum by utilising one of the two existing rain-water reservoirs for that purpose; this will give us an increased water storage of 250,000 gallons. The advantage of this increase, in the event of a temporary breakdown of the pumping machinery, or in case of a fire occurring, is manifest.

A large painting and renovating contract has been carried out during the year. This work included several of the male and female blocks, the central kitchen, bakehouse, &c., and, externally, the south-west fronts of the male blocks.

Several minor structural additions and alterations have also been carried out.

There have been but few changes in the staff of the attendants, who have performed their duties in a generally satisfactory manner.

It gives me pleasure to bear testimony to the cheerful and efficient assistance I have at all times received from my colleagues, Drs. Campbell and Thomas, and the other officers of the Asylum.

Permit me, in concluding this Report, to sincerely thank you for the valuable support I have received from you in the discharge of my duties.

I have the honour to be,

Madam and Gentlemen,

Your obedient Servant,

(Signed) G. STANLEY ELLIOT,
Medical Superintendent.

No. 12.

REPORT OF DR. T. B. DYER, MEDICAL SUPERINTENDENT OF
THE DARENTH ASYLUM.

(For Statistics, see pp. 135 to 159.)

DARENTH ADULT ASYLUM,

NEAR DARTFORD, KENT,

January, 1893.

To the Committee of Management.

LADIES AND GENTLEMEN,

I have the honour to submit to you my Annual Report for the year 1892.

The following table shows the changes that have occurred during the year, and they are further explained in the accompanying tables of the Lunacy Statistics :—

	Males.	Females.	Total.
In the Asylum, 1st January, 1892	446	580	1,026
Admitted during the year... ..	35	51	86
Discharged during the year	13	6	19
Died during the year... ..	32	43	75
Remaining in the Asylum 31st December, 1892	436	582	1,018

The admissions this year have not been so numerous as last, and in July it was deemed necessary by the Committee to stop all further admissions direct from the parishes, and to receive only cases from the Schools, as vacancies were required at the latter for new cases.

As most of the patients sent from the Schools appear to be either helpless or epileptic, and as the accommodation at the Adult Asylum is limited to receive only a fair proportion of such cases (the larger proportion of the adult wards being constructed for healthy patients, and, consequently, being unfit for epileptic and helpless ones), the Committee think that, to make provision for the School transfers, corresponding chronic cases from the Adult Asylum should be sent to the other Asylums of the Board, if vacancies can be obtained for them.

The Committee have in contemplation the addition of verandahs to some of the existing blocks, thus being able to convert the upper floors into combined dormitories and day-rooms, by which means more infirm and helpless cases could be provided for. It is also being arranged to build an infirmary near town, where aged weak-minded infirm cases could be sent direct from the workhouses, thus relieving these existing Asylums from numerous cases of this kind, and thereby avoiding such patients travelling so long a distance, and also being within easier reach of their friends in case of illness.

The discharges this year have been small in number, 19 in all, of which 10 men and four women were discharged as unsuitable cases for an Imbecile Asylum, and three men and two women as improved. Of course, we cannot expect to show many cases of recovery or improvement, as these Asylums are only meant to receive the chronic, harmless, incurable cases.

The deaths this year were 32 men and 42 women. There was an inquest held on a female, aged 80, who sustained an intra-capsular fracture, and a verdict of accidental death was returned.

A few cases of Influenza and Erysipelas and one of Measles occurred, but with these exceptions we have had no epidemic this year.

The diet of the inmates continues good, and the beef-tea made after the new formula still gives satisfaction.

The employment of the patients still continues in the various departments in a satisfactory manner, many male patients working in the tailors', shoemakers', or upholsterers' shops, while some are employed on the farm and grounds. The women who are sufficiently well do needlework or help in the kitchen or laundry, many also assisting in ward-cleaning (as do the males in their blocks).

The weekly entertainments for the recreation of the patients, consisting of dancing, theatricals, and concerts, take place as usual throughout the winter, the male patients in the summer having cricket, and as many patients as possible are taken for walks in the neighbourhood. Two amateur dramatic companies from London kindly gave us excellent performances at their own expense this year. The annual summer fête was much enjoyed by the patients.

A privilege has lately been granted to the Staff of the Asylum by the South-Eastern Company in allowing the use of cheap day return tickets to London. This will be much appreciated, as till now the fares were comparatively high for the distance.

In conclusion, I have to thank Mr. Taylor and Dr. White for the assistance they have given me in the performance of my duties.

I have also to thank the Committee for kindly granting me last winter an extended leave of absence, at a time when my health was far from satisfactory (during which time the work of the Asylum was efficiently carried on by the Assistant Medical Officer, who was appointed Medical Superintendent *pro tem.*), and for their continued support and confidence during the past year.

I am, Ladies and Gentlemen,

Your obedient Servant,

(Signed) T. B. DYER,

Medical Superintendent.

	LEAVESDEN ASYLUM.					
	Males.	Females.	Total.	Males.	Females.	Total.
In the Asylums, 1st January, 1892...	...	...	...	872	1,082	1,954
Admitted for the first time during the year, direct from the several Parishes and Unions ...	181	150	331	...	...	...
Re-admitted during the year...	4	2	6	...	...	...
Admitted from other Asylums of the Board ...	...	...	...	185	152	337
Total under care during the year ...	...	...	...	1,057	1,234	2,291
Discharged—						
Not insane ...	...	1	1	...	...	...
Recovered ...	17	7	24	...	...	...
Improved ...	7	4	11	...	...	...
Not improved ...	13	13	26	...	...	...
To other Asylums of Board...	...	...	...	...	...	...
Died ...	131	111	242	...	...	...
Total discharged (for various reasons) and died during the year	...	...	...	168	136	304
Remaining in the Asylums, 31st December, 1892...	...	...	...	889	1,098	1,987
Average numbers resident during the year ...	...	...	...	857	1,068	1,925
Highest number resident on any one day ...	...	...	...	889	1,098	1,987
Lowest number resident on any one day ...	...	...	...	846	1,044	1,890

TABLE II.—*Showing the Admissions, Re-admissions, and Discharges from*

[N.B.—The following are the dates of the opening of the several Asylums:—

	LEAVESDEN ASYLUM.					
	Males.	Females.	Total.	Males.	Females.	Total.
Admitted during the period of 22 $\frac{3}{4}$ years, direct from the several Parishes and Unions ...	3,253	3,310	6,563	...	...	...
Re-admissions ...	36	15	51	...	...	...
Admitted from other Asylums of Board ...	182	231	413	...	...	...
Total of cases admitted ...	...	...	...	3,471	3,556	7,027
Discharged—						
Not insane ...	2	5	7	...	...	...
Recovered ...	175	108	283	...	...	...
Improved ...	180	141	321	...	...	...
Not improved ...	216	232	448	...	...	...
To other Asylums of Board*...	44	33	77	...	...	...
Died ...	1,965	1,939	3,904	...	...	...
Total discharged and died during the 22 $\frac{3}{4}$ years	...	...	...	2,582	2,458	5,040
Remaining 31st December, 1892 ...	...	...	...	889	1,098	1,987
Average numbers resident during the 22 $\frac{3}{4}$ years	...	...	...	821	1,038	1,859

N.B.—From the 16th April, 1873, to November, 1876, the North-Western Hospital (Hampstead) was used as an Asylum the other Asylums of the Board. 222 patients (91 male and 131 female) died and

CATERHAM ASYLUM.						DARENTH ASYLUM.						SUMMARY.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
...	...	...	937	1,064	2,001	...	...	...	446	580	1,026	...	...	...	2,255	2,726	4,981
101	114	215	...	...	...	24	19	43	...	...	...	306	283	589	...	...	...
2	1	3	...	...	...	...	1	1	...	...	...	6	4	10	...	...	...
...	...	...	...	...	...	11	31	42	...	...	...	11	31	42	...	...	...
...	...	...	103	115	218	...	...	...	35	51	86	...	...	...	323	318	641
...	...	...	1,040	1,179	2,219	...	...	...	481	631	1,112	...	...	...	2,578	3,044	5,622
1	...	1	...	...	...	...	...	...	...	...	...	1	1	2	...	...	...
4	2	6	...	...	...	...	...	...	...	...	...	21	9	30	...	...	...
5	3	8	...	...	...	3	2	5	...	...	...	15	9	24	...	...	...
6	8	14	...	...	...	10	4	14	...	...	...	29	25	54	...	...	...
...
83	95	178	...	...	...	32	43	75	...	...	...	246	249	495	...	...	...
...	...	...	99	108	207	...	...	...	45	49	94	...	...	...	312	293	605
...	...	...	941	1,071	2,012	...	...	...	436	582	1,018	...	...	...	2,266	2,751	5,017
...	...	...	919	1,045	1,964	...	...	...	446	580	1,026	...	...	...	2,222	2,693	4,915
...	...	...	942	1,073	2,015	...	...	...	447	596	1,043	...	...	...	2,278	2,767	5,045
...	...	...	890	1,026	1,916	...	...	...	443	574	1,017	...	...	...	2,179	2,644	4,823

the Opening of the First Asylum to the present date, 31st December, 1892.

LEAVESDEN, 9th October, 1870; CATERHAM, 29th September, 1870; and DARENTH, 4th May, 1880.]

CATERHAM ASYLUM.						DARENTH ASYLUM.						SUMMARY.					
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
616	3,254	6,870	...	...	...	775	1,113	1,888	...	...	...	7,644	7,677	15,321	...	...	...
29	28	57	...	...	...	2	9	11	...	...	...	67	52	119	...	...	...
128	204	332	...	...	...	324	285	609	...	...	...	634	720	1,354	...	...	...
...	...	...	3,773	3,486	7,259	...	...	...	1,101	1,407	2,508	...	...	...	8,345	8,449	16,794
4	2	6	...	...	...	7	12	19	...	...	...	13	19	32	...	...	...
218	165	383	...	...	...	30	21	51	...	...	...	423	294	717	...	...	...
252	148	400	...	...	...	110	111	221	...	...	...	542	400	942	...	...	...
158	146	304	...	...	...	68	86	154	...	...	...	442	464	906	...	...	...
87	48	135	...	...	...	73	82	155	...	...	...	204	163	367	...	...	...
113	1,906	4,019	...	...	...	377	513	890	...	...	...	4,455	4,358	8,813	...	...	...
...	...	...	2,832	2,415	5,247	...	...	...	665	825	1,490	...	...	...	6,079	5,698	11,777
...	...	...	941	1,071	2,012	...	...	...	436	582	1,018	...	...	...	2,266	2,751	5,017
...	...	...	814	1,033	1,847	...	...	...	297	449	746	...	...	...	1,932	2,520	4,452

eciles, and during that period 1,201 patients were admitted direct from the several Parishes and Unions, as well as some from Leavesden and Caterham.

137 LUNACY STATISTICS.—TABLE III.—Showing the Admissions, Discharges, and Admissions for the year 1883,

YEAR.	ADMITTED.					DISCHARGED.											
	FROM PARISHES AND UNIONS.		FROM OTHER ASYLUMS OF BOARD.		Total Admissions.	RECOVERED.			IMPROVED.			NOT IMPROVED.			TO OTHER ASYLUMS OF BOARD.		
	Male.	Female.	Male.	Female.		Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
LEAVESDEN ASYLUM.																	
1883	80	107	...	...	187	2	3	5	7	7	14	6	1	7	...	...	...
1884	58	96	...	...	154	1	8	9	4	7	11	4	7	11	...	...	...
1885	73	97	...	...	170	7	9	16	4	5	9	3	6	9	...	...	...
1886	65	86	...	...	151	...	1	1	4	1	5	9	5	14	...	...	...
1887	82	92	...	...	174	2	1	3	6	2	8	7	4	11	...	...	...
1888	73	83	...	...	156	5	4	9	4	1	5	5	5	10	...	...	...
1889	142	122	...	...	264	3	4	7	10	5	15	5	11	16	...	...	...
1890	163	157	...	...	320	12	9	21	7	7	14	5	6	11	...	...	...
1891	179	150	...	...	329	13	8	21	14	12	26	7	†9	16	...	...	...
1892	185	152	...	...	337	17	7	24	7	4	11	13	14	27	...	...	...
CATERHAM ASYLUM.																	
1883	76	40	...	...	116	10	4	14	6	5	11	6	1	7	...	...	...
1884	100	103	...	...	203	4	11	15	5	9	14	4	4	8	...	...	...
1885	62	51	...	...	113	8	6	14	4	2	6	1	...	1	...	...	...
1886	118	92	...	...	210	6	5	11	4	4	8	3	2	5	...	...	...
1887	105	91	...	...	196	8	5	13	9	6	15	3	5	8	...	...	...
1888	83	81	...	...	164	6	6	12	4	1	5	8	7	15	...	...	...
1889	92	79	...	...	171	13	4	17	1	2	3	6	7	13	...	...	...
1890	121	123	...	...	244	5	2	7	4	3	7	5	6	11	...	...	...
1891	104	108	...	...	212	*3	4	7	2	5	7	5	7	12	...	...	...
1892	103	115	...	...	218	*5	2	7	5	3	8	6	8	14	...	...	...
DARENTH ASYLUM.																	
1883	107	153	6	8	274	...	...	...	3	2	5	3	6	9	...	...	...
1884	57	67	...	...	124	6	7	13	3	4	7	8	14	22	...	...	...
1885	40	54	22	30	146	23	10	33	...	...	...	9	8	17	...	...	...
1886	46	63	20	8	137	...	...	...	27	21	48	3	10	13	...	...	...
1887	41	39	12	69	161	...	...	...	19	20	39	4	7	11	...	...	...
1888	49	70	124	46	289	...	...	...	18	14	32	2	6	8	21	40	...
1889	128	113	26	9	276	...	...	...	26	10	36	8	6	14	...	...	...
1890	74	86	...	...	160	...	...	...	3	23	26	11	8	19	52	42	...
1891	59	92	...	...	151	7	12	†19	4	8	12	8	4	12	...	...	...
1892	24	20	11	31	86	...	...	...	3	2	5	10	4	14	...	...	...
SUMMARY.																	
1883	263	300	6	8	577	12	7	19	16	14	30	15	8	23	...	...	...
1884	215	266	...	...	481	11	26	37	12	20	32	16	25	41	...	...	...
1885	175	202	22	30	429	38	25	63	8	7	15	13	14	27	...	...	...
1886	229	241	20	8	498	6	6	12	35	26	61	15	17	32	...	...	...
1887	228	222	12	69	531	10	6	16	34	28	62	14	16	30	...	...	...
1888	205	234	124	46	609	11	10	21	26	16	42	15	18	33	21	40	...
1889	362	314	26	9	711	16	8	24	37	17	54	19	24	43	...	...	...
1890	358	366	...	...	724	17	11	28	14	33	47	21	20	41	52	42	...
1891	342	350	...	...	692	23	24	47	20	25	45	20	20	40	...	...	...
1892	312	287	11	31	641	22	9	31	15	9	24	29	26	55	...	...	...

* 1 not insane.

† 4 not insane.

‡ 19 not insane.

DIED.			Remaining 31st December.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers Resident.		
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
59	99	158	894	1,090	1,984	894	1,090	1,984	2.5	2.8	2.6	6.6	9.0	7.9
53	73	126	890	1,091	1,981	898	1,095	1,993	1.7	8.3	5.8	5.9	6.6	6.3
58	89	147	891	1,079	1,970	895	1,085	1,980	9.4	9.2	9.7	6.4	8.2	7.4
58	58	116	885	1,100	1,985	893	1,095	1,988	0.0	1.1	0.6	6.5	5.3	5.8
52	93	145	900	1,092	1,992	895	1,092	1,987	2.4	1.1	1.7	5.8	8.5	7.3
76	76	152	883	1,089	1,972	890	1,090	1,980	6.8	4.8	5.7	8.5	7.0	7.7
124	109	233	883	1,082	1,965	887	1,085	1,972	2.1	3.2	2.6	13.9	10.0	11.8
181	124	305	841	1,093	1,934	853	1,081	1,934	7.3	5.7	6.5	21.2	11.4	15.7
114	132	246	872	1,082	1,954	851	1,089	1,940	7.2	5.3	6.3	13.4	12.1	12.7
131	111	242	889	1,098	1,987	857	1,068	1,925	9.2	4.6	7.1	15.3	10.4	12.6
66	54	120	913	1,064	1,977	930	1,080	2,010	13.1	10.0	12.0	7.0	5.0	5.9
69	65	134	931	1,078	2,009	930	1,082	2,012	4.0	10.6	7.3	7.4	6.0	6.6
74	64	138	906	1,057	1,963	913	1,060	1,973	12.9	11.7	12.3	8.1	6.0	6.9
78	69	147	933	1,069	2,002	915	1,061	1,976	5.0	5.4	5.2	8.5	6.5	7.4
75	74	149	943	1,070	2,013	928	1,072	2,000	7.6	5.4	6.6	8.0	6.9	7.4
78	85	163	930	1,052	1,982	936	1,068	2,004	7.2	7.4	7.3	8.3	7.9	8.1
83	72	155	919	1,046	1,965	930	1,048	1,978	14.1	5.0	9.9	8.9	6.8	7.8
107	100	207	919	1,058	1,977	918	1,062	1,980	4.1	0.8	2.4	11.6	9.4	10.4
76	86	162	937	1,064	2,001	922	1,060	1,982	2.8	3.7	3.3	8.2	8.1	8.1
83	95	178	941	1,071	2,012	919	1,045	1,964	3.8	1.7	2.7	9.0	9.0	9.0
35	47	82	304	472	776	267	400	667	...	...	...	13.1	11.7	12.2
36	40	76	308	474	782	308	476	784	10.5	10.4	10.4	11.6	8.4	9.6
36	59	95	302	481	783	298	447	745	37.0	11.9	22.6	12.0	13.1	12.7
26	37	63	312	484	796	310	481	791	...	...	...	8.3	7.6	8.0
25	34	59	317	531	848	307	483	790	...	...	...	8.1	7.0	7.4
31	40	71	418	547	965	330	530	860	...	...	...	9.3	7.5	8.2
54	53	107	484	600	1,084	467	588	1,055	...	...	...	11.5	9.0	10.1
51	62	113	441	551	992	449	563	1,012	...	...	...	11.3	11.0	11.1
35	39	74	446	580	1,026	443	553	996	...	...	...	7.9	7.0	7.4
32	43	75	436	582	1,018	446	580	1,026	...	...	...	7.1	7.4	7.3
160	200	360	2,111	2,626	4,737	2,091	2,570	4,661	4.4	2.2	3.3	7.6	7.7	7.7
158	178	336	2,129	2,643	4,772	2,136	2,653	4,789	5.1	19.7	7.6	7.3	6.7	7.0
168	212	380	2,099	2,617	4,716	2,106	2,592	4,698	19.2	10.7	14.6	7.9	8.1	8.0
162	164	326	2,130	2,653	4,783	2,118	2,637	4,755	2.0	2.4	2.4	7.6	6.2	6.9
152	201	353	2,160	2,693	4,853	2,130	2,647	4,777	4.1	2.0	3.0	7.1	7.6	7.3
185	201	386	2,231	2,688	4,919	2,156	2,688	4,844	3.3	3.5	3.4	8.5	7.4	7.9
261	234	495	2,286	2,728	5,014	2,284	2,721	5,005	4.1	2.5	3.5	11.4	8.5	9.8
339	286	625	2,201	2,702	4,903	2,220	2,706	4,926	4.7	3.0	3.8	15.2	10.5	12.7
225	257	482	2,255	2,726	4,981	2,216	2,702	4,918	4.4	3.4	3.9	10.1	9.5	9.8
246	249	495	2,266	2,751	5,017	2,222	2,693	4,915	6.8	2.8	4.8	11.0	9.2	10.0

139 LUNACY STATISTICS.—TABLE IV.—*Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients admitted during the year 1892 direct from the several Parishes and Unions.*

MENTAL DISEASES.	LEAVESDEN ASYLUM.			CATERHAM ASYLUM.			DARENTH ASYLUM.			SUMMARY.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Mania ... ..	...	...	...	1	2	3	...	...	...	1	2	3
Mania (Chronic)... ..	...	7	7	16	15	31	...	1	1	16	23	39
Mania and Epilepsy ... ..	...	1	1	...	...	...	...	...	...	...	1	1
Melancholia... ..	2	7	9	3	7	10	...	...	...	5	14	19
General Paresis	9	4	13	2	2	4	3	...	3	14	6	20
Dementia	52	58	110	46	45	91	1	2	3	99	105	204
Dementia and Paralysis	...	...	...	...	1	1	...	2	2	...	3	3
Dementia and Epilepsy	9	14	23	6	4	10	2	1	3	17	19	36
Senile Dementia... ..	23	1	24	3	16	19	3	4	7	29	21	50
Idiocy	12	1	13	...	...	...	3	1	4	15	2	17
Imbecility	17	10	27	19	19	38	10	8	18	46	37	83
Imbecility and Epilepsy	12	7	19	6	4	10	2	1	3	20	12	32
Of Weak Mind	7	2	9	...	...	...	...	...	...	7	2	9
Not Insane ... ..	...	...	...	1	...	1	...	...	...	1	...	1
Senile Devolution ... ..	...	1	1	...	...	..	...	...	...	...	1	1
Not Insane	3	...	3	...	...	...	...	...	...	3	...	3
Epilepsy	32	13	45	...	...	...	...	...	...	32	13	45
Delusional Insanity	6	15	21	...	...	...	...	...	...	6	15	21
Mental Stupor	1	8	9	...	...	...	...	...	...	1	8	9
Delusional Insanity and Epilepsy	...	1	1	...	...	...	...	...	...	...	1	1
Alcoholic Insanity with Mental Depression	...	2	2	...	...	...	...	...	...	...	2	2
Totals	185	152	337	103	115	218	24	20	44	312	287	599

UNACY STATISTICS.—TABLE V.—*Classifying, under the usual denominations of Mental Disease, the Mental Condition of the Patients resident in the Asylum on the 31st December, 1892.*

MENTAL DISEASES.	LEAVESDEN ASYLUM.			CATERHAM ASYLUM.			DARENTH ASYLUM.			SUMMARY.		
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
Mania	1	7	8	...	11	11	...	1	1	1	19	20
Mania, Chronic	57	79	136	21	72	93	28	45	73	106	196	302
Mania and Epilepsy ...	3	8	11	1	...	1	2	...	2	6	8	14
Melancholia... ..	11	58	69	43	64	107	1	7	8	55	129	184
General Paresis	13	10	23	14	3	17	9	4	13	36	17	53
Dementia	216	289	505	358	383	741	52	93	145	626	765	1,391
Dementia and Paralysis	9	50	59	48	39	87	15	24	39	72	113	185
Dementia and Epilepsy	70	135	205	74	117	191	77	80	157	221	332	553
Senile Dementia ...	47	61	108	33	10	43	23	40	63	103	111	214
Idiocy	57	39	96	28	20	48	37	64	101	122	123	245
Imbecility	274	150	424	319	352	671	121	148	269	714	650	1,364
Imbecility and Epilepsy	68	137	205	2	...	2	50	66	116	120	203	323
Of Weak Mind	17	24	41	...	...	...	21	10	31	38	34	72
Mental Stupor	7	20	27	...	...	...	...	...	...	7	20	27
Epilepsy	32	13	45	...	...	...	...	...	...	32	13	45
Delusional Insanity ...	6	15	21	...	...	...	...	...	...	6	15	21
Not Insane	1	...	1	...	...	...	...	...	...	1	...	1
Delusional Insanity } and Epilepsy }	...	1	1	...	...	...	...	...	...	...	1	1
Alcoholic Derangement	...	2	2	...	...	...	...	...	...	...	2	2
Totals	889	1,098	1,987	941	1,071	2,012	436	582	1,018	2,266	2,751	5,017

LUNACY STATISTICS.—TABLE VI.—Showing the History of the Annual numbers of each year's admissions

YEAR.	ADMITTED.							OF EACH YEAR'S ADMISSIONS, DISCHARGED AND DIED IN 1892.														
	New Cases.		Relapsed Cases.		From other Asylums of Board.		Total.	Recovered.			Improved.			Not Improved.			To other Asylums of Board.			Died.		
	Males.	Females.	Males.	Females.	Males.	Females.		Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
LEAVESDEN ASYLUM.																						
Part of } 1870	468	556	...	...	...	...	1,024	...	...	...	...	...	...	...	...	...	...	...	8	14	22
1871	520	545	...	...	...	...	1,065	...	...	...	1	1	...	...	...	...	...	...	9	6	15
1872	163	256	...	...	...	...	419	...	...	...	...	...	...	...	...	...	...	...	2	3	5
1873	141	165	...	...	41	30	377	...	...	...	...	...	...	...	...	...	...	...	1	3	4
1874	115	149	1	...	1	13	279	...	...	...	...	...	...	...	...	...	...	...	1	4	5
1875	111	108	1	1	...	...	221	...	...	...	...	...	...	...	...	...	...	...	1	2	3
1876	158	79	...	...	126	184	547	...	...	...	...	...	1	1	...	...	...	...	9	7	16
1877	95	...	...	...	1	4	100	...	...	...	...	...	...	...	...	...	...	...	4	...	4
1878	69	1	1	...	13	...	84	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1879	80	89	...	...	...	...	169	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1880	92	75	...	...	...	...	167	...	...	...	...	...	...	...	...	...	...	...	4	...	4
1881	85	71	4	1	...	...	161	...	...	...	...	...	...	...	...	...	...	...	2	2	4
1882	82	85	3	2	...	...	172	...	1	1	...	...	...	...	...	...	...	...	1	2	3
1883	75	106	5	1	...	...	187	...	...	...	...	...	...	...	...	...	...	...	1	2	3
1884	56	96	2	...	...	...	154	...	...	...	...	...	...	...	...	...	...	...	1	5	6
1885	71	97	2	...	...	...	170	...	...	...	...	...	...	...	...	...	...	...	1	6	7
1886	62	83	3	3	...	...	151	1	...	1	...	...	...	...	...	...	...	...	1	4	5
1887	80	92	2	...	...	...	174	...	...	...	1	1	...	...	...	...	...	...	6	1	7
1888	71	83	2	...	...	...	156	...	...	...	1	1	...	3	3	...	...	...	2	4	6
1889	140	121	2	1	...	...	264	1	1	2	1	1	2	...	2	...	...	...	9	6	15
1890	162	155	1	2	...	...	320	2	...	2	...	1	1	2	3	5	...	...	16	10	26
1891	176	148	3	2	...	...	329	6	2	8	2	1	3	3	3	6	...	...	39	21	60
1892	181	149	4	2	...	1	337	7	3	10	2	1	3	6	4	10	...	...	11	9	20
Totals	3,253	3,309	36	15	182	232	7,027	17	7	24	7	4	11	13	14	27	...	...	131	111	242
CATERHAM ASYLUM.																						
Part of } 1870	156	202	...	...	...	...	358	...	...	...	...	...	...	...	...	...	...	...	3	4	7
1871	664	870	...	...	...	...	1,534	...	...	...	...	...	...	...	...	...	...	...	7	15	22
1872	259	161	...	...	...	...	420	...	...	...	...	...	1	...	1	...	...	...	3	3	6
1873	183	167	1	...	...	...	351	...	...	...	...	...	...	...	...	...	...	...	...	1	11
1874	240	169	2	3	72	36	522	...	...	...	...	...	...	...	...	...	...	...	4	...	4
1875	158	180	...	...	...	...	338	...	...	...	...	...	...	...	...	...	...	...	1	4	5
1876	173	170	5	5	33	167	553	...	...	...	1	1	...	...	...	...	...	...	6	7	13
1877	178	56	2	...	...	1	237	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1878	157	47	...	...	17	...	221	...	...	...	...	...	...	...	...	...	...	...	2	2	4
1879	176	84	...	...	6	...	266	...	...	...	...	...	...	...	...	...	...	...	3	4	7
1880	122	87	2	6	...	...	217	...	...	...	...	...	1	1	2	...	...	...	1	1	2
1881	122	105	...	...	...	...	227	...	...	...	1	1	1	1	2	...	...	...	...	2	2
1882	81	85	...	2	...	...	168	...	...	...	...	...	...	...	...	...	...	...	4	2	6
1883	73	37	3	3	...	...	116	...	...	...	...	...	...	...	...	...	...	...	1	3	4
1884	98	102	2	1	...	...	203	...	...	...	...	...	...	...	...	...	...	...	3	1	4
1885	59	48	3	3	...	...	113	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1886	115	91	3	1	...	...	210	...	...	...	1	1	...	1	1	...	...	...	4	3	7
1887	103	90	2	1	...	...	196	...	...	...	1	1	1	1	2	...	...	...	3	3	6
1888	83	81	...	...	...	...	164	...	...	...	...	...	...	...	...	...	...	...	5	6	11
1889	92	78	...	1	...	...	171	...	...	...	1	1	...	1	1	...	...	...	5	1	6
1890	119	122	2	1	...	...	244	2	1	3	1	1	...	...	...	...	...	...	8	13	21
1891	104	108	...	...	...	...	212	2	1	3	1	1	2	1	3	...	...	...	14	14	28
1892	101	114	2	1	...	...	218	1	...	1	...	1	...	2	2	...	...	...	5	6	11
Totals	3,616	3,254	29	28	128	204	7,259	5	2	7	5	3	8	6	8	14	...	...	83	95	178

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS TO 31ST DECEMBER, 1892.

REMAINING OF EACH YEAR'S ADMISSIONS, 31ST DECEMBER, 1892.

Recovered.			Improved.			Not Improved.			To other Asylums of Board.			Died.			REMAINING OF EACH YEAR'S ADMISSIONS, 31ST DECEMBER, 1892.		
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
15	8	23	25	19	44	24	44	68	12	4	16	306	395	701	86	86	172
20	15	35	29	23	52	49	48	97	15	10	25	350	350	680	77	99	176
12	6	18	12	11	23	14	14	28	5	14	19	113	158	271	7	53	60
9	4	13	8	6	14	16	21	37	10	5	15	118	122	240	21	37	58
7	2	9	2	7	9	12	16	28	2	...	2	88	102	190	6	35	41
5	3	8	3	5	8	17	13	30	...	...	...	68	62	130	19	26	45
12	3	15	18	7	25	11	12	23	...	...	...	176	161	337	67	80	147
7	...	7	5	...	5	3	...	3	...	...	...	59	1	60	22	3	25
5	...	5	4	...	4	3	...	3	...	...	...	51	1	52	20	...	20
3	3	6	3	5	8	3	6	9	...	...	...	55	50	105	16	25	41
8	4	12	9	8	17	8	2	10	...	...	...	55	32	87	12	29	41
10	7	17	6	5	11	5	3	8	...	...	...	52	41	93	16	16	32
3	6	9	3	5	8	3	3	6	...	...	...	53	51	104	23	22	45
3	2	5	5	8	13	3	7	10	...	...	...	50	54	104	19	36	55
1	8	9	3	3	6	4	7	11	...	...	...	32	56	88	18	22	40
4	9	13	5	3	8	4	5	9	...	...	...	46	47	93	14	33	47
2	...	2	3	1	4	7	3	10	...	...	...	32	43	75	21	39	60
4	3	7	5	2	7	5	4	9	...	...	...	44	44	88	24	39	63
4	3	7	4	2	6	5	3	8	...	...	...	40	26	66	20	49	69
8	4	12	9	4	13	5	8	13	...	...	...	70	44	114	50	62	112
14	11	25	10	8	18	6	6	12	...	...	...	60	57	117	73	75	148
12	4	16	7	8	15	5	8	13	...	...	...	56	33	89	99	97	196
7	3	10	2	1	3	6	4	10	...	...	...	11	9	20	159	135	294
175	108	283	180	141	321	218	237	455	44	33	77	1,965	1,939	3,904	889	1,098	1,987
4	4	8	7	13	20	6	7	13	2	1	3	91	130	221	46	47	93
47	31	78	50	30	80	47	35	82	19	6	25	438	599	1,037	63	169	232
24	12	36	24	10	34	11	9	20	16	11	27	167	101	268	17	18	35
19	10	29	19	6	25	13	19	32	11	8	19	99	106	205	23	18	41
18	24	42	30	13	43	...	...	...	36	18	54	190	120	310	40	35	75
13	11	24	10	8	18	8	8	16	1	3	4	108	115	223	18	35	53
2	11	13	21	13	34	5	9	14	...	...	...	136	202	338	47	107	154
...	...	...	14	4	18	3	3	6	1	...	1	126	33	159	36	17	53
5	3	8	11	1	12	3	5	8	1	...	1	102	25	127	52	13	65
6	4	10	9	4	13	11	...	11	...	...	...	116	39	155	40	37	77
7	4	11	11	7	18	8	7	15	...	...	...	73	53	126	25	22	47
3	2	5	6	5	11	10	4	14	...	...	...	65	57	122	38	37	75
9	10	19	5	5	10	2	5	7	...	...	...	41	44	85	24	22	46
11	4	15	4	3	7	3	1	4	...	1	1	39	16	55	19	15	34
7	12	19	8	10	18	3	3	6	...	...	...	48	45	93	34	33	67
2	2	4	...	1	1	2	2	4	...	...	...	33	28	61	25	18	43
12	5	17	6	5	11	6	4	10	...	...	...	57	36	93	37	42	79
7	4	11	6	2	8	6	6	12	...	...	...	38	33	71	48	46	94
4	4	8	5	...	5	3	4	7	...	...	...	40	39	79	31	33	64
8	2	10	3	3	6	5	8	13	...	...	...	41	25	66	35	41	76
6	5	11	2	2	4	3	3	6	...	...	...	40	32	72	70	81	151
5	2	7	1	2	3	2	3	5	...	...	...	20	22	42	76	79	155
1	...	1	...	1	1	...	2	2	...	...	...	5	6	11	97	106	203
220	166	386	252	148	400	160	147	307	87	48	135	2,113	1,906	4,019	941	1,071	2,012

LUNACY STATISTICS — TABLE VI. (continued) — Showing the History of Deaths, and the numbers of each year's

YEAR.	ADMITTED.							OF EACH YEAR'S ADMISSIONS, DISCHARGED AND DIED IN 1892.														
	New Cases.		Relapsed Cases.		From other Asylums of Board.			Recovered.			Impr'ved.			Not Improved.			To other Asylums of Board.			Died.		
	Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
DARENTH ASYLUM.																						
1880	...	163	...	...	25	54	242	...	...	...	...	...	...	1	1	...	...	...	...	7	7	...
1881	...	15	...	1	...	13	29	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
1882	...	152	185	...	1	78	17	433	...	...	...	...	1	...	1	...	...	...	...	1	3	4
1883	...	107	153	...	...	6	8	274	...	...	...	...	...	...	...	...	...	...	...	1	2	3
1884	...	57	67	...	...	...	...	124	...	...	...	...	...	1	1	...	...	...	...	...	1	1
1885	...	40	54	...	...	22	30	146	...	...	...	...	...	...	...	...	...	...	...	...	2	2
1886	...	45	62	1	1	20	8	137	...	...	...	...	...	1	1	...	...	...	...	4	1	5
1887	...	41	35	...	4	12	69	161	...	...	...	...	...	...	...	...	...	...	...	4	1	5
1888	...	49	70	...	...	124	46	289	...	...	...	...	...	...	...	...	...	...	...	4	5	9
1889	...	127	112	1	1	26	9	276	...	...	...	1	1	3	3	...	...	...	...	4	6	10
1890	...	74	86	...	...	...	...	160	...	...	...	2	1	3	3	...	...	...	...	4	5	9
1891	...	59	92	...	...	...	...	151	...	...	...	2	2	4	4	...	...	...	...	10	10	20
1892	...	24	19	...	1	11	31	86	...	...	...	2	2	...	...	...	...	...	4	...	4	4
Totals	...	775	1,113	2	9	324	285	2,508	...	...	...	3	2	5	10	4	14	...	...	32	43	75

SUMMARY.																							
Part of		Males.	Females.	Males.	Females.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
1870	...	624	758	...	...	...	...	1,382	...	...	...	...	...	...	...	...	...	...	...	11	18	29
1871	...	1,184	1,415	...	...	...	...	2,599	...	...	...	1	1	...	...	...	...	...	...	16	21	37
1872	...	422	417	...	...	...	...	839	...	...	...	...	...	1	1	...	...	...	...	5	6	11
1873	...	324	332	1	...	41	30	728	...	...	...	...	...	...	...	...	...	...	...	1	4	5
1874	...	355	318	3	3	73	49	801	...	...	...	...	...	...	...	...	...	...	...	5	4	9
1875	...	269	288	1	1	...	...	559	...	...	...	...	...	...	...	...	...	...	...	2	6	8
1876	...	331	249	5	5	159	351	1,100	...	...	...	1	1	...	1	1	...	...	...	15	14	29
1877	...	273	56	2	...	1	5	337	...	...	...	...	...	...	...	...	...	...	...	5	...	5
1878	...	226	48	1	...	30	...	305	...	...	...	...	...	...	...	...	...	...	...	3	2	5
1879	...	256	173	...	...	6	...	435	...	...	...	...	...	...	...	...	...	...	...	4	4	8
1880	...	214	325	2	6	25	54	626	...	...	...	...	1	2	3	...	...	...	...	5	8	13
1881	...	207	191	4	2	...	13	417	...	...	...	1	1	1	1	2	...	...	...	2	4	6
1882	...	315	355	3	5	78	17	773	...	1	1	...	...	1	...	1	...	...	...	6	7	13
1883	...	255	296	8	4	6	8	577	...	...	...	...	...	...	...	...	...	...	...	3	7	10
1884	...	211	265	4	1	...	...	481	...	...	...	...	...	1	1	...	...	...	...	4	7	11
1885	...	170	199	5	3	22	30	429	...	...	...	...	...	...	...	...	...	...	...	1	8	9
1886	...	222	236	7	5	20	8	498	1	...	1	1	...	2	2	...	...	...	...	9	8	17
1887	...	224	217	4	5	12	69	531	...	...	...	2	...	1	1	2	...	...	...	9	5	14
1888	...	203	234	2	...	124	46	609	...	...	...	1	1	...	3	3	...	...	...	11	15	26
1889	...	359	311	3	3	26	9	711	1	1	2	3	...	3	5	1	6	...	...	18	13	31
1890	...	355	363	3	3	...	...	724	4	1	5	1	1	2	4	4	8	...	...	28	28	56
1891	...	339	348	3	2	...	...	692	8	3	11	5	1	6	9	4	13	...	...	63	45	108
1892	...	306	282	6	4	11	32	641	8	3	11	2	4	6	6	6	12	...	...	20	15	35
Grand Totals	...	7,644	7,676	67	52	634	721	16,794	*	22	9	31	15	9	24	29	* 26	55	246	249	495

* Includes one not insane.

TOTAL DISCHARGED AND DIED OF EACH YEAR'S ADMISSIONS,
31ST DECEMBER, 1892.

REMAINING OF
EACH YEAR'S
ADMISSIONS,
31ST DECEMBER, 1892.

Recovered.			Improved.			Not Improved.			To other Asylums of Board.			Died.			REMAINING OF EACH YEAR'S ADMISSIONS, 31ST DECEMBER, 1892.		
Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
2	3	5	6	12	18	1	11	12	...	3	3	3	102	105	13	86	99
...	2	2	...	5	5	...	1	1	...	...	...	...	11	11	...	10	10
8	4	12	20	14	34	7	16	23	2	1	3	101	101	202	92	67	159
7	6	13	9	8	17	13	17	30	...	1	1	67	80	147	17	49	66
7	3	10	8	7	15	7	8	15	...	...	...	26	36	62	9	13	22
6	3	9	13	9	22	3	5	8	2	2	4	19	38	57	19	27	46
...	...	...	10	14	24	1	7	8	2	1	3	28	29	57	25	20	45
...	...	...	14	4	18	3	5	8	...	4	4	19	23	42	17	72	89
...	...	...	14	11	25	5	6	11	56	67	123	28	27	55	70	5	75
...	...	...	12	17	29	14	5	19	11	3	14	49	31	80	68	66	134
...	...	...	...	...	...	10	4	14	...	...	...	21	23	44	41	51	92
7	12	19	4	8	12	4	1	5	...	...	...	12	12	24	34	67	101
...	...	...	...	2	2	...	...	...	...	...	...	4	...	4	31	49	80
37	33	70	110	111	221	68	86	154	73	82	155	377	513	890	436	582	1,018
19	12	31	32	32	64	30	51	81	14	5	19	397	525	922	132	133	265
67	46	113	79	53	132	96	83	179	34	16	50	768	949	1,717	140	268	408
36	18	54	36	21	57	25	23	48	21	25	46	280	259	539	24	71	95
28	14	42	27	12	39	29	40	69	21	13	34	217	228	445	44	55	99
25	26	51	32	20	52	12	16	28	38	18	56	278	222	500	46	70	116
18	14	32	13	13	26	25	21	46	1	3	4	176	177	353	37	61	98
14	14	28	39	20	59	16	21	37	...	...	...	312	363	675	114	187	301
7	...	7	19	4	23	6	3	9	1	...	1	185	34	219	58	20	78
10	3	13	15	1	16	6	5	11	1	...	1	153	26	179	72	13	85
9	7	16	12	9	21	14	6	20	...	...	...	171	89	260	56	62	118
17	11	28	26	27	53	17	20	37	...	3	3	131	187	318	50	137	187
13	11	24	12	15	27	15	8	23	...	...	...	117	109	226	54	63	117
20	20	40	28	24	52	12	24	36	2	1	3	195	196	391	139	111	250
21	12	33	18	19	37	19	25	44	...	2	2	156	150	306	55	100	155
15	23	38	19	20	39	14	18	32	...	...	...	106	137	243	61	68	129
12	14	26	18	13	31	9	12	21	2	2	4	98	113	211	58	78	136
14	5	19	19	20	39	14	14	28	2	1	3	117	108	225	83	101	184
11	7	18	25	8	33	14	15	29	...	4	4	101	100	201	89	157	246
8	7	15	23	13	36	13	13	26	56	67	123	108	92	200	121	87	208
16	6	22	24	24	48	24	21	45	11	3	14	160	100	260	153	169	322
20	16	36	12	10	22	19	13	32	...	...	...	121	112	233	184	207	391
24	18	42	12	18	30	11	12	23	...	...	...	88	67	155	209	243	452
8	3	11	2	4	6	6	6	12	...	...	...	20	15	35	287	290	577
432	307	739	542	400	942	446	470	916	204	163	367	4,455	4,358	8,813	2,266	2,751	5,017

LEAVESDEN

CAUSES OF DEATH.

	Under 16		17		18		19		20 to 29		30 to 39	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
CEREBRAL OR SPINAL DISEASES—												
Brain Softening
Dementia
Epilepsy	5
Epilepsy and Dementia
Hæmorrhage
Imbecility	1	..	..
Mania (Chronic)
General Paresis	4	2
Syphilis	1
Meningitis	1	..	..	..	..	..	..	..	..	..	..
THORACIC DISEASE—												
Morbus Cordis	1	2
„ „ and Lung Disease	1	..
„ „ and Dementia
Pulmonary Tuberculosis (Chronic)	1	..	..	..	1	..	12	1	13	1
Pneumonia	1	..	..	..	..	..
ABDOMINAL DISEASES—												
Enteric Tuberculosis
Morbus Renum
Peritonitis (Chronic)
Volvulus	1
GENERAL DISEASES—												
General Tuberculosis
Malignant New Growths
Struma	1	..	..	..
Senile Decay
Totals	1	1	..	..	..	2	..	13	2	19	12

CATERHAM

CEREBRAL OR SPINAL DISEASES—												
Apoplexy and Paralysis ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Epilepsy and Convulsions ... ..	..	..	..	..	..	..	1	..	2	..	2	6
General Paresis ... ..	..	..	..	..	..	..	..	..	..	2	3	2
Maniacal Exhaustion ... ..	..	..	..	..	..	..	..	..	..	..	..	1
Exhaustion of Dementia... ..	..	..	..	..	..	..	..	..	..	..	..	..
„ „ Imbecility ... ..	..	..	..	..	..	..	1	..	1	..	3	1
Meningo-Encephalitis ... ..	..	..	..	..	..	..	..	..	..	1	..	1
Sarcoma of Brain... ..	..	..	..	..	..	..	..	..	..	..	..	..
THORACIC DISEASE—												
Pneumonia... ..	..	..	..	..	..	..	..	..	..	..	4	1
Bronchitis ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Phthisis ... ..	..	..	..	..	..	..	1	..	2	2	6	2
Cancer of Lung ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Disease of the Heart ... ..	..	..	..	..	..	..	..	..	..	..	..	..
ABDOMINAL DISEASE—												
Bright's Disease ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Suppurative Nephritis ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Cancer of Liver ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Cancer of Stomach ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Diarrhœa ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever ... ..	..	..	..	..	..	..	..	..	..	..	1	..
Ovarian Cystic Tumor ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Fibroid Tumor of the Uterus ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Accidental Suffocation in Epileptic Fit ... ..	..	..	..	1	..	..	..	..	..	..	..	..
Carcinoma of Breast ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Gangrene of Foot ... ..	..	..	..	..	..	..	..	..	..	..	..	..
General Debility and Decay of Old Age ... ..	..	..	..	..	..	..	..	..	..	..	..	..
Totals ... ..	..	..	..	1	..	..	3	..	5	5	19	14

ASYLUM.

40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Above 100.		Ages Unknown.		TOTAL.		
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	TOTAL.
...	2	1	2	2	2	3	3	...	...	...	...	...	...	...	...	6	9	15
2	1	7	4	7	1	13	5	2	4	...	1	...	...	...	...	31	16	47
2	4	...	2	1	2	1	1	...	1	...	...	...	...	...	...	4	15	19
...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	...	2
...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	1	1	...	...	2	...	...	...	...	...	...	...	...	...	...	2	4	6
...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...	2
3	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	8	4	12
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	4	1	1	6	6	2	7	...	2	...	...	...	...	...	...	10	22	32
...	1	...	1	2	1	1	1	...	...	...	...	...	...	...	...	4	4	8
...	...	3	3	...	7	5	7	...	1	...	...	...	...	...	...	8	18	26
7	1	4	1	...	1	...	...	...	...	...	...	...	...	1	...	39	5	44
...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	1	3
1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	2	2
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	2	...	...	...	...	3	...	...	1	...	...	...	...	...	...	3	3	6
1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	3
...	...	...	...	...	...	1	1	1	3	...	...	...	...	...	...	2	4	6
20	19	23	16	19	23	30	25	3	12	...	1	...	...	1	...	131	111	242

ASYLUM.

1	...	1	...	1	1	1	...	...	...	...	...	...	...	...	...	4	1	5
1	3	2	1	1	2	...	1	...	...	...	...	...	...	...	...	9	13	22
2	1	...	1	1	...	...	...	...	...	...	...	...	...	...	...	6	6	12
...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	1	2	3
...	...	1	3	5	2	2	...	...	...	...	...	...	...	...	...	8	5	13
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5	1	6
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	3
1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
2	1	1	1	2	2	...	3	1	...	...	...	...	...	...	...	10	8	18
...	...	...	...	...	1	...	2	1	1	...	...	...	...	...	...	1	4	5
1	3	...	2	...	1	...	...	...	...	...	...	...	...	...	...	10	10	20
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
3	1	1	1	7	4	9	2	1	...	...	...	...	...	...	...	21	8	29
1	...	...	...	...	2	...	...	...	...	...	...	...	...	...	...	1	2	3
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	4	12	1	7	...	1	...	...	...	...	5	20	25
12	12	6	15	18	19	16	20	4	8	...	1	...	...	...	...	83	95	178

												DARENTH											
CAUSES OF DEATH.												16		17		18		19		20 to 29		30 to 39	
												Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
CEREBRAL OR SPINAL DISEASES—																							
Apoplexy																					1		
Epilepsy																				2	1		1
General Paresis ..																						1	1
Dementia of Paralysis																							
Abscess of Brain																					1		
THORACIC DISEASE—																							
Phthisis														1				1		5	3	1	2
Heart Disease																		1					
Pneumonia... ..																					1		1
Bronchitis																							
ABDOMINAL DISEASE—																							
Renal Calculus																							
Nephritis																							
Diarrhoea																	1						
Erysipelas																					1		
Cancer of Uterus																							
Senile Decay																							
Inquests... ..																							
Totals														1			1	2		8	7	2	5

SUM

CEREBRAL OR SPINAL DISEASES—																							
Apoplexy and Paralysis																							
Epilepsy and Convulsions																		1		2		2	6
General Paresis																					2	8	5
Dementia of Paralysis																							
Softening of Brain																							
Maniacal Exhaustion																							1
Melancholic Exhaustion ..																							
Exhaustion of Dementia ...																							
Exhaustion of Imbecility ...																		1		1		3	1
Meningitis... ..																							
Meningo-Encephalitis													1										
Imbecility																					1		1
Epilepsy																				2	1		6
Epilepsy and Dementia																							
Apoplexy																					1		
Abscess of Brain																					1		
Syphilis																							1
Dementia																							
Sarcoma of Brain																							
Hæmorrhage																							
Mania (Chronic)																							
Carried forward													1					2		5	7	13	21

ASYLUM.

40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Ages not known.		TOTAL.		
Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	TOTAL.
..	1	1	1	1	1	..	3	..	1	..	..	..	..	2	3	10
..	1	..	..	..	..	2	3	5
2	1	..	1	..	..	..	..	..	..	..	..	3	3	6
..	1	..	2	..	..	..	..	..	..	..	3	3
..	1	1
..	3	..	1	1	..	..	..	..	..	..	..	..	..	9	9	18
..	2	1	..	..	..	..	..	2	2	4
1	1	..	1	3	2	1	..	..	..	..	..	5	6	11
..	2	..	1	..	..	..	..	..	..	..	3	..	3
..	1	..	..	..	..	..	..	..	1	1
..	..	1	1	..	1	1	..	..	..	..	..	..	..	2	2	4
..	1	1
..	2	..	..	..	..	..	..	..	..	..	3	..	3
..	1	..	..	..	..	..	..	..	..	..	1	1
..	1	..	..	2	..	..	..	..	1	2	3
..	1	..	..	..	..	..	1	1
3	4	2	5	6	6	6	10	2	5	..	..	..	..	32	43	75

MARY.

1	..	1	..	1	1	1	..	..	..	..	..	..	..	4	1	5
1	3	2	1	1	2	..	1	..	..	..	..	..	..	9	13	22
7	3	1	2	1	1	..	..	..	..	..	..	..	..	17	13	30
..	..	..	..	..	1	..	2	..	..	..	..	..	..	..	3	3
..	2	1	2	2	2	3	3	..	..	..	..	..	..	6	9	15
..	..	..	1	1	..	..	..	..	..	..	..	..	..	1	2	3
..
..	..	1	3	5	2	2	..	..	..	..	..	..	..	8	5	13
..	..	..	..	..	..	..	..	..	..	..	..	..	..	5	1	6
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	3	3
1	1	1	..	..	2	..	..	..	..	..	..	..	..	2	4	6
2	4	..	2	1	2	1	1	..	2	..	..	..	..	6	18	24
..	..	..	..	1	..	1	..	..	..	..	..	..	..	2	..	2
..	1	1	1	1	1	..	3	..	1	..	..	..	..	2	8	10
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2
2	1	7	4	7	1	13	5	2	4	..	1	..	..	31	16	47
1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	1
..	..	2	..	..	..	..	..	..	..	..	..	..	..	2	..	2
16	16	18	16	21	15	21	15	2	7	..	1	..	..	98	99	197

SUMMARY

CAUSES OF DEATH.	16		17		18		19		20 to 29		30 to	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Brought forward	1	...	...	...	...	2	...	5	7	13	...
THORACIC DISEASE—												
Phthisis	1	...	...	...	2	...	7	5	7	...
Pneumonia	1	...	...	1	4	...
Bronchitis
Disease of the Heart	1	...	...	...	...	...
Cancer of Lung
Pulmonary Tuberculosis (Chronic)	1	...	...	...	1	...	12	1	13	...
Morbus Cordis	1	...
Morbus Cordis and Lung Disease	1	...
Morbus Cordis and Dementia
ABDOMINAL DISEASE—												
Renal Calculus
Peritonitis (Chronic)
Diarrhœa	1	...	...	...	...	...	...
Cancer of Stomach
Cancer of Liver
Accidental Suffocation in Epileptic Fit	1	...	...	...	...	...	...	...	...
Volvulus
Nephritis
Enteric Fever	1	...
Enteric Tuberculosis
Bright's Disease
Morbus Renum
Suppurative Nephritis
Fibroid Tumour of the Uterus
Ovarian Cystic Tumour
Gangrene of Foot
General Debility and Decay of Old Age
Erysipelas	1	...	...	...
Struma	1	...	...	...
General Tuberculosis
Malignant New Growths
Carcinoma of Breast
Cancer of Uterus
Senile Decay
Inquests
Grand Totals	1	2	1	...	1	7	...	26	14	40	...

—Continued.

40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Ages not known.		TOTAL.		
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	TOTAL.
16	16	18	16	21	15	21	15	2	7	...	1	...	...	98	99	197
1	6	...	3	1	1	...	...	...	...	...	...	...	...	19	19	38
3	2	2	2	2	3	3	5	2	...	...	...	...	...	17	15	32
...	...	...	...	2	1	1	2	1	1	...	...	...	...	4	4	8
3	1	1	1	7	4	9	4	2	...	...	...	...	...	23	10	33
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
7	1	4	1	...	1	...	...	...	...	...	...	...	...	39	5	44
..	4	1	1	6	6	2	7	...	2	...	...	...	...	10	22	32
...	1	...	1	2	1	1	1	...	...	...	...	...	...	4	4	8
...	...	3	3	...	7	5	7	...	1	...	...	...	...	8	18	26
...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	1
1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	...	...	2	...	...	...	...	...	...	...	...	...	...	...	3	3
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	1	1	...	1	1	...	...	...	...	...	...	...	2	2	4
...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
1	...	...	1	...	...	...	...	...	...	...	...	...	...	1	1	2
1	...	...	...	...	2	...	...	...	...	...	...	...	...	1	2	3
...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	2	2
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	4	12	1	7	...	1	...	...	5	20	25
...	...	...	...	2	...	...	...	...	...	...	...	...	...	3	...	3
1	...	1	...	...	...	...	...	...	...	...	...	...	...	3	...	3
1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
...	2	...	...	...	...	3	...	...	1	...	...	...	...	3	3	6
...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
...	...	...	...	...	...	2	1	1	5	...	...	...	...	3	6	9
...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	1
35	35	31	36	43	48	52	55	9	25	...	2	1	...	246	249	495

LENGTH OF RESIDENCE.	LEAVESDEN ASYLUM.					
	RECOVERED.			DIED.		
	M.	F.	Total.	M.	F.	Total.
Under 1 Month	2	...	2	1	4	5
From 1 to 3 Months	5	3	8	7	6	13
" 3 to 6	...	...	...	10	3	13
" 6 to 9	2	1	3	18	6	24
" 9 to 12	1	...	1	6	3	9
" 1 to 2 Years	4	1	5	24	13	37
" 2 to 3	1	...	1	8	7	15
" 3 to 5	1	1	2	9	7	16
" 5 to 7	1	...	1	2	6	8
" 7 to 10	...	1	1	3	11	14
" 10 to 12	...	...	...	3	4	7
" 12 to 14	...	...	...	5	2	7
" 14 to 16	...	...	...	9	8	17
" 16 to 18	...	...	...	5	6	11
" 18 to 20	...	...	...	3	3	6
" 20 and upwards...	...	...	...	18	22	40
Total	17	7	24	131	111	242

LUNACY STATISTICS.—TABLE IX.—Showing the Ages of Patients resident in the several Asylums in the Order

Years ending December 31st.	Under 16		16		17		18		19		20		20 to	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	
LEAVESDEN ASYLUM.														
1883	15	9	22	14	24	1	33	11	25	14	164	
1884	17	9	23	16	25	2	33	12	26	14	169	
1885	19	11	23	19	25	2	36	11	26	14	172	
1886	19	13	25	19	24	3	37	12	26	16	176	
1887	20	13	24	22	26	2	38	14	28	17	185	
1888	23	17	27	25	28	2	41	14	29	16	184	
1889	26	20	28	28	31	6	44	15	30	16	191	
1890	1	2	5	2	7	8	7	6	4	7	126	
1891	4	1	4	4	11	5	10	8	9	8	123	
1892	6	2	16	2	9	9	10	5	9	11	120	
CATERHAM ASYLUM.														
1883	4	2	10	5	10	7	18	2	183	
1884	2	2	5	4	11	9	20	4	185	
1885	4	3	5	5	10	12	18	9	175	
1886	3	5	4	8	6	12	13	20	16	174	
1887	2	2	1	8	7	7	10	12	24	18	178	
1888	2	3	2	8	8	7	12	14	25	19	170	
1889	3	4	4	9	9	9	13	15	26	21	165	
1890	...	1	...	4	2	2	3	4	5	2	8	5	148	
1891	...	1	1	3	3	3	4	5	6	4	7	6	145	
1892	5	2	4	6	5	8	8	12	9	11	147	
DARENTH ASYLUM.														
1883	10	12	4	8	19	20	40	23	36	24	64	
1884	6	...	11	1	22	18	23	15	34	23	69	
1885	8	4	4	14	19	15	5	3	...	44	140	
1886	...	1	1	10	6	5	5	4	11	2	...	...	166
1887	...	3	1	9	18	9	24	23	18	16	17	21	20	116
1888	32	28	35	23	33	23	29	14	32	22	133	
1889	27	8	42	32	33	29	30	25	27	14	153	
1890	6	3	16	8	25	21	26	17	25	20	158	
1891	3	6	8	6	16	9	27	22	26	19	178	
1892	7	9	9	18	15	11	15	14	26	24	189	
SUMMARY.														
1883	25	21	30	24	53	26	83	41	79	40	411	
1884	23	9	36	19	52	24	67	36	80	41	423	
1885	27	15	31	36	49	22	51	26	44	67	487	
1886	...	1	1	29	22	35	28	36	20	51	26	46	32	516
1887	...	3	1	31	33	34	54	56	27	64	43	73	55	479
1888	57	48	64	56	69	32	82	42	86	57	487	
1889	56	32	74	69	73	44	87	55	83	51	509	
1890	...	1	...	7	9	23	12	35	33	38	25	37	32	432
1891	...	1	...	8	10	15	13	31	19	43	34	42	33	446
1892	18	13	29	26	29	28	33	31	44	46	456	

CATERHAM ASYLUM.						DARENTH ASYLUM.						SUMMARY.					
RECOVERED.			DIED.			RECOVERED.			DIED.			RECOVERED.			DIED.		
M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
1	...	1	...	...	...	...	...	...	1	...	1	3	...	3	2	4	6
...	3	3	6	...	...	...	1	2	3	5	3	8	11	11	20
1	1	2	3	3	6	...	...	...	2	...	2	1	1	2	15	6	22
...	4	3	7	...	...	...	4	...	4	2	1	3	26	9	33
...	5	3	8	...	...	...	2	2	4	1	...	1	13	8	22
3	1	4	11	18	29	...	...	...	7	10	17	7	2	9	42	41	90
...	6	4	10	...	...	...	1	3	4	1	...	1	15	14	42
...	8	9	17	...	...	...	8	9	17	1	1	2	25	25	37
...	4	4	8	...	...	...	3	3	6	1	...	1	9	13	33
...	8	5	13	...	...	...	3	4	7	...	1	1	14	20	33
...	1	4	5	...	...	...	...	10	10	...	...	...	4	18	19
...	5	5	10	...	...	...	...	...	...	...	...	...	10	7	27
...	7	6	13	...	...	...	...	...	...	...	...	...	16	14	30
...	5	5	10	...	...	...	...	...	...	...	...	...	10	11	21
...	2	4	6	...	...	...	...	...	...	...	...	...	5	7	12
...	11	19	30	...	...	...	...	...	...	...	...	...	29	41	70
5	2	7	83	95	178	...	...	...	32	43	75	22	9	31	246	249	495

the 31st December in 1883, and on the same day in each subsequent year, calculated from the ages stated of Admission.

30 to 39		40 to 49		50 to 59		60 to 69		70 to 79		80 to 89		90 to 99		Above 100.		Ages not known.		TOTALS.		
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Total.
191	226	196	235	109	218	81	161	23	38	...	6	1	...	...	10	18	894	1,090	1,984
196	231	194	242	107	213	75	164	14	35	...	...	1	...	...	10	16	890	1,091	1,981
198	236	200	247	107	214	66	156	11	19	...	...	...	...	...	8	11	891	1,079	1,970
202	237	194	259	103	216	66	158	5	6	...	...	...	...	...	8	10	885	1,100	1,985
196	250	198	259	102	197	76	142	...	...	...	...	...	...	...	7	14	900	1,092	1,992
190	247	195	260	104	202	55	131	...	...	...	...	...	...	...	7	13	883	1,089	1,972
180	256	198	259	94	192	56	122	...	...	...	...	...	...	...	5	...	883	1,082	1,965
178	195	175	240	174	212	102	178	46	114	7	32	1	5	...	8	16	841	1,093	1,934	
188	188	180	222	166	224	116	177	47	128	8	29	1	3	...	5	10	872	1,082	1,954	
184	197	194	212	156	207	124	207	50	120	6	23	1	2	...	4	12	889	1,098	1,987	
202	184	167	196	138	190	130	189	44	87	7	29	...	...	...	...	9	913	1,064	1,977
205	180	168	201	146	209	135	190	48	81	6	26	...	...	...	...	3	931	1,078	2,009
195	175	160	194	140	204	137	183	55	79	7	22	...	...	...	...	...	906	1,057	1,963
190	184	165	190	151	216	139	181	60	70	9	17	...	...	...	...	...	933	1,069	2,002
186	180	170	192	155	204	142	180	58	73	8	29	2	1	...	...	6	943	1,070	2,013
180	182	165	189	150	190	149	184	60	74	7	28	...	...	...	...	...	930	1,052	1,982
184	190	151	178	149	180	142	177	63	72	9	33	1	...	...	...	...	919	1,046	1,965
210	220	187	201	152	191	138	183	51	89	11	36	...	1	1	...	2	7	919	1,058	1,977
205	226	196	196	160	186	142	182	54	91	14	40	...	...	...	...	6	937	1,064	2,001
200	230	192	198	162	184	140	185	56	88	13	37	...	...	...	...	...	941	1,071	2,012
32	70	18	64	33	45	28	58	12	42	7	10	1	1	...	...	...	304	472	776
35	68	22	66	36	47	29	59	11	46	9	14	1	2	...	...	...	308	474	782
28	70	26	65	20	45	34	55	12	51	5	17	1	1	...	...	...	302	481	783
35	67	23	72	17	45	36	56	11	42	2	20	...	2	...	...	...	312	484	796
27	56	20	70	23	42	36	58	11	43	3	14	...	1	...	...	...	317	531	848
29	65	28	67	21	39	31	68	13	33	2	18	...	1	...	...	...	418	547	965
46	86	37	75	25	55	43	66	19	42	2	17	...	...	...	...	...	484	600	1,084
52	97	39	65	26	67	42	63	22	46	4	11	...	1	...	...	2	441	551	992
56	105	39	81	25	62	42	64	22	49	4	14	...	1	...	...	2	446	580	1,026
54	108	39	77	23	62	36	59	19	38	4	12	...	3	...	...	2	436	582	1,018
425	480	381	495	280	453	239	408	79	167	14	45	2	1	10	27	2,111	2,626	4,737
436	479	384	509	289	469	239	413	73	162	15	40	2	2	10	19	2,129	2,643	4,772
421	481	386	506	267	463	237	394	78	149	12	39	1	1	8	11	2,099	2,617	4,716
427	488	382	521	271	477	241	395	76	118	11	37	...	2	8	10	2,130	2,653	4,783
409	486	388	521	280	443	254	380	69	116	11	43	2	2	7	20	2,160	2,693	4,853
399	494	388	516	275	431	235	383	73	107	9	46	...	1	7	13	2,231	2,688	4,919
410	532	386	512	268	427	241	365	82	114	11	50	1	5	...	2,286	2,728	5,014
440	512	401	506	352	470	282	424	119	249	22	79	1	7	1	...	10	25	2,201	2,702	4,903
449	519	415	499	351	472	300	423	123	268	26	83	1	4	5	18	2,255	2,726	4,981
438	535	425	487	341	453	300	451	125	246	23	72	1	5	4	14	2,266	2,751	5,017

LEAVESDEN ASYLUM.

AGES.	The Admissions.						The Discharges.						The Deaths.		
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
„ 15 to 20 „ ...	25	10	35	...	...	...	2	...	2	5	2	7	2	2	4
„ 20 to 30 „ ...	34	21	55	...	...	...	2	1	3	7	4	11	18	3	21
„ 30 to 40 „ ...	30	22	52	...	...	...	5	1	6	4	4	8	17	10	27
„ 40 to 50 „ ...	22	14	36	...	...	...	4	2	6	2	4	6	20	21	41
„ 50 to 60 „ ...	23	20	43	...	...	...	2	2	4	2	...	2	23	17	40
„ 60 to 70 „ ...	32	29	61	...	...	...	2	1	3	...	2	2	17	19	36
„ 70 to 80 „ ...	18	30	48	...	...	...	...	...	...	...	2	2	29	26	55
„ 80 to 90 „ ...	...	4	4	...	...	...	...	...	...	...	...	...	3	12	15
„ 90 and upwards... ..	...	1	1	...	...	...	...	...	...	...	...	...	1	1	2
Ages unknown ... ..	...	1	1	...	...	...	...	...	...	...	...	...	1	...	1
Totals	185	152	337	...	...	...	17	7	24	20	18	38	131	111	242

DARENTH ASYLUM.

AGES.	The Admissions.						The Discharges.						The Deaths.		
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 15 to 20 „ ...	9	3	12	11	29	40	...	...	...	...	...	...	3	1	4
„ 20 to 30 „ ...	4	7	11	...	1	1	...	...	...	6	2	8	8	6	14
„ 30 to 40 „ ...	3	2	5	...	1	1	...	...	...	3	2	5	2	6	8
„ 40 to 50 „ ...	3	1	4	...	...	...	...	...	...	1	1	2	3	4	7
„ 50 to 60 „ ...	...	1	1	...	...	...	...	...	...	1	...	1	2	4	6
„ 60 to 70 „ ...	3	3	6	...	...	...	...	...	...	2	...	2	6	7	13
„ 70 to 80 „ ...	1	1	2	...	...	...	...	...	...	...	1	1	6	10	16
„ 80 to 90 „ ...	1	2	3	...	...	...	...	...	...	...	...	...	2	5	7
„ 90 and upwards... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Ages unknown ... ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	24	20	44	11	31	42	...	...	...	13	6	19	32	43	75

CATERHAM ASYLUM.

AGES.	The Admissions.						The Discharges.						The Deaths.		
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 15 to 20 „ ...	13	4	17	...	...	...	...	...	...	2	2	4	3	1	4
„ 20 to 30 „ ...	12	9	21	...	...	...	3	1	4	4	2	6	5	5	10
„ 30 to 40 „ ...	18	26	44	...	...	...	1	...	1	3	3	6	19	14	33
„ 40 to 50 „ ...	16	20	36	...	...	...	...	...	...	3	2	5	12	12	24
„ 50 to 60 „ ...	15	18	33	...	...	...	1	...	1	...	1	1	7	15	22
„ 60 to 70 „ ...	14	17	31	...	...	...	...	1	1	1	1	2	17	19	36
„ 70 to 80 „ ...	11	16	27	...	...	...	...	...	...	...	...	...	16	20	36
„ 80 to 90 „ ...	2	5	7	...	...	...	...	...	...	...	...	...	4	8	12
„ 90 and upwards...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Ages unknown ...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...
Totals ...	103	115	218	...	...	...	5	2	7	11	11	22	83	95	178

SUMMARY.

AGES.	The Admissions.						The Discharges.						The Deaths.		
	From Parishes and Unions.			From other Asylums of Board.			Recovered.			Removed, Improved, or otherwise.					
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
From 5 to 10 years ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
„ 10 to 15 „ ...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
„ 15 to 20 „ ...	47	17	64	11	29	40	2	...	2	5	4	9	8	4	12
„ 20 to 30 „ ...	50	37	87	...	1	1	5	2	7	17	8	25	31	14	45
„ 30 to 40 „ ...	51	50	101	...	1	1	6	1	7	10	9	19	38	30	68
„ 40 to 50 „ ...	41	35	76	...	...	...	4	2	6	6	7	13	35	37	72
„ 50 to 60 „ ...	38	39	77	...	...	...	3	2	5	3	1	4	32	36	68
„ 60 to 70 „ ...	49	49	98	...	...	...	2	2	4	3	3	6	40	45	85
„ 70 to 80 „ ...	30	47	77	...	...	...	...	...	...	...	3	3	51	56	107
„ 80 to 90 „ ...	3	11	14	...	...	...	...	...	...	...	...	...	9	25	34
„ 90 and upwards...	...	1	1	...	...	...	...	...	...	...	...	...	1	2	3
Ages unknown ...	2	1	3	...	...	...	...	...	...	...	...	...	1	...	1
Grand Totals...	312	387	599	11	31	42	22	9	31	44	35	79	246	249	495

DEPARTMENTS.	LEAVESDEN ASYLUM.	CATERHAM ASYLUM.	DARENTH ASYLUM.	SUMMARY MALES.
MALES.				
Blocks	116	132	*50	298
Centre and Hall	3	5	4	12
Coaling	8	6	1	15
Stores	6	2	2	10
Kitchen	30	13	...	43
Bakehouse	7	2	3	12
Mess Room... ..	6	6	1	13
Tailor's Shop	9	8	18	35
Shoemaker's Shop	6	10	12	28
Upholsterer's Shop	32	18	18	68
Painter's Shop	1	2	...	3
Grounds	79	38	50	167
Laundry	20	18	...	38
Farm... ..	...	...	20	20
Gas House	4	6	...	10
Engine House	3	2	...	5
Attending to Earth Closets and Drains ... ..	...	3	3	6
Residences ... ..	...	...	...	.
Carpenters	2	...	...	2
Bricklayers ... ..	...	...	...	...
Medical Superintendent's Residence	...	...	...	...
Lodge ... ..	...	1	...	1
Steward's Residence ... ..	...	1	...	1
Total	332	273	182	787
Total number of Patients in Asylum	889	941	436	2,266

* Cleaning.

OCCUPATIONS.	LEAVESDEN ASYLUM.					CATERHAM ASYLUM.					DARENTH ASYLUM.					SUMMARY. MALES.					
	NUMBERS.					NUMBERS.					NUMBERS.					NUMBERS.					
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	
MALES.																					
Accountant ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Accoutrement Maker	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Art Scholar ...	...	...	...	...	...	1	...	...	...	1	...	...	...	...	...	1	...	...	...	1
Bath Attendant	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Blacksmiths...	2	...	...	...	2	...	1	...	1	2	...	...	...	...	...	2	1	...	1	1
Boiler Maker	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	...	...	1	...	...
Bookseller ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Boot Clicker	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	...
Bottler ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Bricklayers ...	2	...	...	...	2	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...
Butcher ...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
Cabdrivers ...	...	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...
Cabinet Maker	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Caretaker ...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	...
Carmen ...	...	3	...	2	5	...	...	...	...	...	...	...	...	...	...	...	3	...	2	...
Carpenters ...	2	1	...	...	3	...	...	...	...	...	...	...	...	...	...	2	1	...	...	...
Carriage-washer	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	...
Cattle-drover	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
Cellarman ...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
Chemist ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Cigar Maker	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1	...	...	...	...
Clerks ...	1	1	...	2	4	...	...	...	1	1	...	...	...	...	...	1	1	...	3	...
Coachmen ...	2	2	...	1	5	...	...	...	...	...	...	...	...	...	...	2	2	...	1	...
Coachpainters	2	...	...	...	2	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...
Cooks ...	...	...	1	...	1	...	2	...	...	2	...	...	...	...	...	...	2	1	...	...
Dentist ...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...
Draughtsman	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	...
Engravers ...	...	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...
Errand Boys...	2	...	...	...	2	...	...	...	...	...	...	...	...	...	...	2	...	...	...	...
Fishermen ...	...	1	...	2	3	...	...	...	...	...	...	...	...	...	...	...	1	...	2	...
French Polishers	1	1	...	...	2	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...
Fruiterer ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	...
Gardeners, Assistant	...	1	...	1	2	...	...	...	2	2	...	...	...	...	...	...	1	...	3	...
Gilder ...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Gunmaker ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Hairdressers...	...	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	2	...	...	...
Hawkers ...	1	2	...	2	5	1	...	...	1	2	...	...	...	...	...	2	2	...	3	...
Horsekeeper...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	...
Jockey ...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Iron Moulder	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	...
Labourers ...	15	4	3	13	35	1	8	...	14	23	...	2	...	2	4	16	14	3	29	6	
Lamplighter...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
Lastmaker ...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
Laundryman	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Matmakers ...	...	...	...	...	...	...	...	...	2	2	...	...	...	...	...	...	...	...	2	...
No occupation	44	3	...	2	49	8	2	...	13	23	22	...	1	...	23	74	5	1	15	9	
Optician ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...
Packers ...	1	1	...	...	2	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...
Painters ...	...	4	...	1	5	...	...	...	1	1	...	...	1	...	1	...	4	1	2	...
Pensioner ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	...
Pianoforte Makers	1	...	...	...	1	...	2	...	...	2	...	...	...	...	...	1	2	...	...	...
Picture-restorer	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Plasterers ...	1	1	...	...	2	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...
Plumbers ...	...	...	...	1	1	...	1	...	...	1	...	...	...	...	...	...	1	...	1	...
Polisher ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	...
Porters ...	3	4	...	...	7	...	...	...	1	1	...	...	...	...	...	3	4	...	1	...
Postmen ...	...	...	...	1	1	...	...	...	1	1	...	...	...	...	...	...	...	...	2	...
Potmen ...	1	...	...	1	2	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...
Carried forward ...	85	39	6	32	162	11	21	...	47	79	23	2	3	2	30	119	62	9	81	27	

OCCUPATIONS.	LEAVESDEN ASYLUM.					CATERHAM ASYLUM.					DARENTH ASYLUM.					SUMMARY.				
	NUMBERS.					NUMBERS.					NUMBERS.					NUMBERS.				
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.
MALES— <i>continued.</i>																				
Brought forward ...	85	39	6	32	162	11	21	...	47	79	23	2	3	2	30	119	62	9	81	271
Printers ...	...	1	...	1	2	1	...	...	...	1	...	...	...	...	...	1	1	...	1	3
Purse Maker ...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
Seamen ...	...	...	...	2	2	...	...	...	1	1	...	...	...	...	...	...	...	...	3	3
Shoeblocks ...	1	1	...	1	3	...	1	...	...	1	...	...	...	...	...	1	2	...	1	4
Shoemakers ...	1	1	...	...	2	...	1	...	2	3	...	...	...	...	...	1	2	...	2	5
Shop Keepers ...	...	...	1	1	2	...	...	...	...	...	...	...	...	...	...	...	...	1	1	2
Stableman ..	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Stokers ...	...	2	...	...	2	...	...	...	...	...	...	...	...	...	...	...	2	...	...	2
Sugar Baker ...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
Surgeons ...	...	...	...	...	...	...	1	...	1	2	...	...	...	...	...	...	1	...	1	2
Tailors ...	...	2	...	...	2	...	1	...	3	4	1	...	...	...	1	1	3	...	3	7
Tanner ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Teacher of Languages	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Time-keeper ...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	1	...	...	1
Tinker ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Tin-plate Worker ...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Traveller ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Unknown ...	...	...	...	...	...	...	...	...	5	5	...	...	...	...	...	...	...	...	5	5
Waiters ...	...	1	...	...	1	...	...	...	...	...	...	1	...	...	1	1	1	...	...	2
Watchman ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Weaver ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Window Cleaner ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	1	1
Wood-carvers ...	...	2	...	...	2	...	...	...	...	...	1	...	...	...	1	1	2	...	...	3
Wood-cutter ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1	...	...	...	1
Wool-sorter ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Total ...	89	49	8	39	185	12	25	...	66	103	26	4	3	2	35	126	78	10	109	323

159 LUNACY STATISTICS.—TABLE XII (continued).—Showing the Occupations prior to admission, and condition as to Marriage of the Patients admitted during the year 18

OCCUPATIONS.	LEAVESDEN ASYLUM.					CATERHAM ASYLUM.					DARENTH ASYLUM.					SUMMARY.				
	NUMBERS.					NUMBERS.					NUMBERS.					FEMALES.				
	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.	Single.	Married.	Widowed.	Unknown.	Total.
FEMALES.																				
Charwomen...	5	1	2	4	12	...	1	2	7	10	...	...	...	...	...	5	2	4	11	20
Cooks ...	1	...	...	1	2	...	...	...	2	2	...	...	...	...	...	1	...	...	...	3
Crape Trimmer ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1
Dressmakers ...	1	1	...	...	2	...	...	...	2	2	...	...	...	...	...	1	1	...	...	2
Firewood Worker ...	...	1	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...
Gardenwork...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Hawker ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Housekeepers ...	...	...	...	...	...	...	...	1	1	2	...	...	...	...	...	...	...	1	1	...
Laundresses...	...	1	...	...	1	...	...	1	1	2	...	1	...	1	2	...	2	1	...	2
Milkwoman ...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1
Needlewomen ...	3	2	...	5	10	...	1	...	4	5	...	...	...	...	...	3	3	...	9	19
Nurses ...	1	...	...	...	1	...	1	1	3	5	...	...	...	...	...	1	1	1	...	3
No occupation ...	34	33	...	24	91	7	18	3	36	64	42	1	...	2	45	83	52	3	62	200
Organist ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1
Paper Box Maker ...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	1
Servants ...	20	3	...	5	28	...	1	...	14	15	4	...	...	...	4	24	4	...	19	44
Shirt Maker ...	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	1	...	...
Telegraph Clerk ...	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...
Unknown ...	...	...	...	...	...	...	...	...	4	4	...	...	...	...	...	...	...	...	...	4
Total ...	66	42	2	42	152	7	22	9	77	115	46	2	...	3	51	119	66	11	122	311

No. 13.

REPORT OF DR. FLETCHER BEACH, MEDICAL SUPERINTENDENT
OF DARENTH SCHOOLS AND PAVILIONS.

(For Statistics, see pp. 164 to 172.)

DARENTH SCHOOLS AND PAVILIONS,
NEAR DARTFORD, KENT,
*January, 1893.**To the Committee of Management.*

LADIES AND GENTLEMEN,

I beg to present to you my Eighteenth Annual Report, with the usual statistical tables.

On the 31st of December, 1891, there were in the Schools and Pavilions 937 patients, viz., 574 males and 363 females.

	Males.	Females.	Totals.
Since that date there have been admitted	77	58	135
Discharged	26	37	63
Died	21	15	36

On the 31st of December, 1892, there remained in the Schools and Pavilions 604 males and 369 females; total, 973—an increase of 36 over those resident at the corresponding period of 1891. The total number under treatment has been 1,072, and the average number daily resident 960.

ADMISSIONS.

The admissions have not been so numerous as usual, as the Schools and Pavilions have for some time been quite full, and in the early part of the year admission was practically stopped for some time. A Sub-Committee of the General Purposes Committee met in the summer to consider in what way vacancies should be provided, and it was decided that admission into the Adult Asylum from the parishes should be stopped, and that the vacancies

caused by deaths and discharges there should be filled up by cases over 16 years of age transferred from the Schools. The difficulty arises from the large number of epileptic and helpless patients sent for admission; these have for many years largely outnumbered the able-bodied cases. As the wards for the epileptic and helpless have for some time been crammed full, vacancies for these cases can only be created by discharges and deaths which occur here or at the Adult Asylum. It is obvious that epileptic patients cannot be placed in the three-storey blocks which have been provided for the able-bodied; to place them there would incur the risk of their falling down stairs in a fit, and seriously injuring or even killing themselves. This does not seem to be understood by the Clerks to the Guardians, some of whom think that, so long as we have room, we are obliged to take any cases they choose to send us. An Infirmary Asylum is much wanted, and I am glad to know that the Managers quite see this, and are at the present time looking out for a site.

DISCHARGES.

These have been more numerous than last year, in consequence of the removal of patients to the Adult Asylum to make room here for cases from the parishes. Forty-two patients, viz., 11 males and 31 females, have been so removed; of these 11 had improved and 31 had not improved. Twenty-one patients, viz., 15 males and six females, were discharged to the parishes; of these, three had improved and eight had not improved. Ten recovered; three of these (males) are now in the army, two girls are retained in the Schools as monitresses, the remainder are either in the workhouse or living with their friends.

DEATHS.

There have been only 36 deaths. As there are a large number of helpless and no less than 300 epileptic cases resident here, the death-rate has been low. It is only 3.35 on the total number under treatment, or 3.75 on the average number daily resident. The causes of death were chiefly Epilepsy and Marasmus (10 being due to the former and 11 to the latter disease); the remaining causes being Inflammation of the Lungs (eight), Whooping Cough (three), Erysipelas (two), and one death each from Phthisis and Intestinal Obstruction.

GENERAL HISTORY.

We have had rather more infectious disease than usual during the past year. There have been 60 cases of Whooping Cough, and, after these had become convalescent, 10 cases of Chicken-pox occurred. On the outbreak of Whooping Cough, the helpless cases which were living in the infectious infirmary were removed to various blocks in the Schools and Pavilions, and

the Whooping Cough cases were sent over. After these and the Chicken-pox patients had become convalescent, they were sent back to the main building, and the helpless cases were returned to the infectious blocks.

Although the Local Government Board fixes the accommodation in the Schools and Pavilions at 1,000, I find it necessary to keep 20 beds vacant, so that, on the occurrence of contagious or infectious disease, the 20 cases now accommodated in the infectious infirmary can be put into these beds, and so room can be made for patients with contagious disease in the building set apart for their treatment.

We have, happily, been free from the epidemic of Influenza which prevailed during the winter months of last year.

There are 459 children on the school register, 269 boys and 190 girls. Of these, 224 have made good progress during the year, 75 have improved slowly, 90 have learnt a little, and 70 have made no progress. 2,300 articles of clothing have been made in the schoolroom. I have to repeat the observation made in last year's report, viz., that the number of children attending school is now so large that more accommodation is required.

Very few of the cases admitted during the year were capable of industrial training, so that only 155 have been employed on the male and 93 on the female side. Twenty-eight work as tailors and 20 as shoemakers. Many of those discharged recovered worked in the shops, where their loss was much felt; nevertheless, in the tailors' shop 232 jackets, 28 vests, 217 pairs of trousers, 13 bed-quilts, and 40 aprons have been made; and 2,213 jackets, 1,381 vests, and 3,801 trousers have been repaired. In the shoemakers' shop, 501 pairs of boots and shoes have been made, and 2,845 pairs of boots and shoes have been repaired. The value of the work done in the tailors' shop is £200, and of that in the shoemakers' shop £222 14s. 7d. In the workroom 8,492 articles have been made.

There have not been quite as many visitors as in past years. Besides the Commissioners in Lunacy and the Inspectors of the Local Government Board, the following have visited the Schools:—

Mr. Chance, J.P. for Surrey;

Mr. Nelson, Member of Board of Health, Ohio, United States;

Dr. Channing, Superintendent of Boston Asylum, United States;

The Architect of the Lancashire County Asylum, Rainhill;

Dr. Smith, Medical Officer of the School Board of London;

Dr. Orange, late Superintendent of the Broadmoor Criminal Lunatic Asylum;

Dr. Long Fox, Consulting Physician, Bristol Royal Infirmary;

Dr. Hack Tuke, Author of "Dictionary of Psychological Medicine";

Dr. Kindred, of Philadelphia, visited the Schools daily for a fortnight.

Forty-five students from various hospitals in London have visited the Schools during the year. All expressed their pleasure at being allowed to study cases of idiocy and imbecility.

There have been many minor structural alterations during the past year. In addition, all the pavilions have been whitewashed and distempered, and a shelter has been provided for the epileptic girls. I am glad to know that the laundry is to be enlarged and a recreation room for the nurses erected.

The entertainments go on as usual. Cricket matches were played during the summer between the boys in the Schools and the patients in the Adult Asylum. Last winter Mr. Walkley kindly gave the patients a magic lantern entertainment, and at Christmas the Editor of *Truth* sent his usual cases of toys for the Christmas-tree. The Editor of *Tit-Bits* also sent a box of dolls, and the Religious Tract Society books and magazines. Frequent theatrical performances have taken place, and last Easter "Our Boys" was played by the staff.

I have again to thank the officers for their kind assistance, and you, Ladies and Gentlemen, for your continued support.

I have the honour to be,

Ladies and Gentlemen,

Your obedient Servant,

(Signed) FLETCHER BEACH, M.B., F.R.C.P.,
Medical Superintendent.

IMBECILITY STATISTICS—DARENTH SCHOOLS AND PAVILIONS.

TABLE I.—*Showing the Admissions, Re-admissions, Discharges, and Deaths during the Year 1892.*

	Males.	Females.	Total.
In the Asylum, 1st January, 1892	574	363	937
	Males.	Females.	Total.
Admitted for the first time during the Year (direct from the several Parishes & Unions)	75	57	132
Re-admitted during the Year	2	1	3
Admitted from other Asylums of Board ...	—	—	—
	77	58	135
Total under care during the Year	651	421	1,072
	Males.	Females.	Total.
Discharged—			
Recovered	7	3	10
Improved	3	—	3
Not Improved	5	3	8
To other Asylums of Board	11	31	42
Died... ..	21	15	36
Total discharged (for various reasons) and died during the Year ..	47	52	99
Remaining in the Asylum, 31st December, 1892	604	369	973
Average numbers resident during the Year	590·4	369·4	959·8
Highest number resident on any one day	601	380	981
Lowest number resident on any one day	569	363	932

TABLE II.—*Showing the Admissions, Re-admissions, and Discharges, from the opening of the Asylum to the present date, 31st December, 1892.*

	Males.	Females.	Total.	Males.	Females.	Total.
Admitted during the period of 18 years (direct from the several Parishes & Unions)	1,290	845	2,135			
Re-admissions	48	37	85			
Admitted from other Asylums of Board ..	229	210	439			
Total of Cases Admitted				1,567	1,092	2,659
	Males.	Females.	Total.			
Discharged—						
Recovered	29	30	59			
Improved	110	86	196			
Not Improved	128	64	192			
To other Asylums of Board	369	296	665			
Died	327	247	574			
Total Discharged and Died during the 18 years				963	723	1,689
Remaining 31st December, 1892				604	369	973
Average numbers resident during the 18 years				333·7	223·5	557·7

TABLE III.—Showing the Admissions, Discharges, and Deaths, with the Mean Annual Mortality and proportion of Recoveries per cent. of the Admissions for the year 1882, and for each subsequent year.

Year.	Admitted.						Discharged.						Died.			Remaining 31st December in each year.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on Average Numbers Resident.					
	From Parishes and Unions.			From other Asylums of Board.			Re-covered.		Im-proved.		Not Im-proved.		To other Asylums of Board.		Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.
1882 ...	88	57	145	2	4	15	5	8	78	17	95	23	17	40	298	198	496	310.2	199.7	509.9	...	3.50	1.38	7.41	8.51	7.84	
1883 ...	88	83	171	...	...	...	1	4	5	10	6	6	8	14	25	16	41	343	247	590	316.0	226.7	542.7	1.13	...	7.91	7.05	7.55
1884 ...	62	28	90	...	...	...	2	3	9	8	2	...	...	...	19	17	36	370	252	622	361.6	255.4	615.0	3.22	3.33	5.25	6.70	5.85
1885 ...	49	28	77	...	...	...	3	4	7	5	12	22	32	54	28	10	38	357	233	590	356.6	248.8	605.4	6.12	3.57	7.85	4.01	6.27
1886 ..	66	34	100	...	...	...	1	3	3	5	8	20	8	28	15	7	22	381	246	627	358.0	243.2	601.2	1.51	5.88	4.19	2.87	3.65
1887 ...	84	62	146	8	11	5	16	12	69	81	17	14	31	422	212	634	404.1	245.3	649.4	...	12.90	4.20	5.70	5.70	4.70	
1888 ...	74	40	114	...	61	95	2	7	5	12	14	124	46	170	29	12	41	341	221	562	417.3	217.6	635.4	2.10	...	6.94	5.51	6.45		
1889 ...	94	62	156	...	...	...	1	2	3	4	7	26	9	35	9	10	19	391	256	647	365.5	249.3	614.8	1.06	1.62	2.46	4.04	3.07
1890 ...	96	62	158	...	94	148	2	1	3	8	11	...	...	...	12	10	22	504	337	841	466.4	311.6	777.8	1.35	0.95	2.57	3.24	2.82
1891 ...	108	64	172	...	...	...	...	1	10	6	16	...	...	...	17	24	41	574	363	937	534.0	351.0	885.0	...	0.01	3.18	6.83	4.63
1892 ...	77	58	135	...	...	...	7	3	10	3	8	11	31	42	21	15	36	604	369	973	590.4	369.4	959.8	9.99	5.17	3.55	4.06	3.75

(For the years from the opening of the Asylum down to and including 1880, see Report for 1886.)

TABLE IV.—*Showing the probable causes of the Mental Condition of the Patients admitted during the Year 1892.*

CAUSES.	Males.	Females.	Total.
I. CONGENITAL—			
Fright of mother during pregnancy	8	6	14
Anxiety and worry of mother during pregnancy	4	4	8
Fright of mother during pregnancy, and difficult labour ...	5	3	8
Fright and anxiety of mother during pregnancy, and tedious labour	3	4	7
Tedious or difficult labour	3	2	5
Injury to mother during pregnancy	2	2	4
Excessive intemperance of parents	1	1	2
Unknown	4	3	7
Premature labour	1	1	2
II. ACQUIRED—			
Epilepsy	10	3	13
Convulsions	5	1	6
Measles	1	1	2
Severe injury to patient	6	5	11
Fright of patient	4	4	8
Illness of patient	3	...	3
Unknown	4	8	12
Not ascertained	13	10	23
Totals	77	58	135

In 15 cases there was a history of Intemperance in the parents.

In 25 cases there was a history of Insanity in the parents or near relatives.

In 9 cases there was a history of Imbecility in the parents.

In 44 cases there was a history of Consumption in the family

In 10 cases there was a history of Epilepsy in the parents.

In 6 cases the parents were first cousins.

TABLE VI.—Showing the Causes of Death during the year 1892, together with the Ages of the Decedents, calculated from the Ages stated on the Orders of Admission.

CAUSES OF DEATH.	Under 5		5 to 10.		10 to 15.		15 to 20.		20 to 25.		TOTAL.		
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.
CEREBRAL OR SPINAL DISEASES—													
Epilepsy	1	1	2	3	1	...	2	4	6	10
THORACIC DISEASE—													
Pneumonia...	1	3	1	1	...	2	...	6	2	8
Whooping Cough	2	...	1	...	...	...	...	...	3	...	3
Phthisis	1	...	...	...	...	...	1	...	
ABDOMINAL DISEASE—													
Intestinal Obstruction	1	...	1	...	1
Marasmus	2	1	2	3	2	1	...	...	6	5	11
Erysipelas	1	...	...	...	1	...	...	...	2	2
Totals	4	4	8	6	6	3	3	2	21	15	36

TABLE VII.—Showing the length of Residence in those Discharged Recovered, and in those who have Died during the year 1892.

LENGTH OF RESIDENCE.	RECOVERED.			DIED.		
	Males.	Females.	Total.	Males.	Females.	Total.
Under 1 Month... ..	...	...	...	...	...	...
From 1 to 3 Months ...	1	...	1	...	...	...
" 3 " 6 " ..	...	...	...	...	...	...
" 6 " 9 " ...	...	...	...	...	3	3
" 9 " 12 " ...	...	...	...	2	5	7
" 1 " 2 Years ...	1	...	1	4	1	5
" 2 " 3 " ...	1	...	1	2	1	3
" 3 " 5 " ...	2	1	3	5	...	5
" 5 " 7 " ...	...	...	...	4	1	5
" 7 " 10 " ...	...	2	2	1	2	3
" 10 " 12 " ...	2	...	2	1	...	1
" 12 " 14 " ...	...	...	...	1	2	3
" 14 " 16 " ..	...	...	...	...	...	...
" 16 " 18 " ...	...	...	...	1	...	1
" 18 " 20 " ...	...	...	...	...	...	...
Totals	7	3	10	21	15	36

TABLE VIII.—Showing the Ages of Patients admitted into the Asylum during 1882, and each subsequent year, calculated from the Ages stated on the Orders of Admission.

Years ending December 31st.	2 to 4.		4 to 6.		6 to 8.		8 to 10.		10 to 12.		12 to 14.		14 to 16.		16.		17.		18.		19.		20 to 40.		TOTALS.			
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.	Total.	
1882	2	3	5	7	16	7	17	6	17	11	10	8	19	12	1	1	1	1	2	..	..	..	..	..	..	88	57	145
1883	4	1	9	12	16	10	14	10	10	19	16	17	19	13	..	..	..	..	..	..	..	..	..	..	..	88	83	171
1884	..	3	13	5	14	2	11	7	12	2	5	4	6	5	1	..	..	..	..	..	..	..	..	..	..	62	28	90
1885	1	2	7	2	5	7	10	3	10	6	10	6	6	1	..	..	..	..	1	..	..	..	..	..	..	49	28	77
1886	..	..	7	1	16	7	9	7	12	7	10	6	12	6	..	..	..	..	..	..	..	..	..	..	..	66	34	100
1887	..	..	8	8	17	5	8	12	20	12	17	15	12	10	2	..	..	..	..	..	..	..	..	..	..	84	62	146
1888	..	..	9	6	12	16	18	7	9	5	10	9	17	3	1	1	3	4	4	4	2	5	10	26	95	80	175	
1889	..	..	10	9	15	3	15	16	23	16	16	11	15	8	..	..	..	..	..	..	..	..	..	..	..	94	62	156
1890	..	..	..	2	20	25	38	5	12	10	17	14	9	6	10	5	5	4	3	15	5	12	17	18	148	104	252	
1891	..	..	36	15	14	8	15	8	14	7	13	12	16	14	..	..	..	..	..	..	..	..	..	..	..	108	64	172
1892	1	..	12	16	11	3	12	9	11	11	14	7	15	12	1	..	..	..	..	..	..	..	..	..	..	77	58	135

(For previous years see Report for 1886.)

TABLE IX.—Showing the Ages of the Admissions, Discharges, and Deaths during the Year 1892, calculated from the Ages stated on the Orders of Admission.

AGES.	THE ADMISSIONS.						THE DISCHARGES.						THE DEATHS.		
	From Parishes and Unions.			From other Asylums of the Board.			Recovered.			Removed, Improved, or Otherwise.			Males.	Females.	Total.
	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.	Males.	Females.	Total.			
Under 5 years ..	1	...	1	...	...	...	...	...	...	...	...	...	...	...	...
From 5 to 10 years	35	28	63	...	...	...	1	...	1	3	1	4	4	4	8
" 10 " 15 "	30	24	54	...	...	...	...	...	...	3	2	5	8	6	14
" 15 " 20 "	11	6	17	...	...	...	6	3	9	13	29	42	6	3	9
" 20 " 30 "	...	...	...	...	...	...	...	...	...	...	1	1	3	2	5
" 30 " 40 "	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...
Total ...	77	58	135	...	...	...	7	3	10	19	34	53	21	15	36

TABLE X.—Showing the Departments where Patients were employed on the 31st December, 1892.

MALES.				FEMALES.			
Departments.			Numbers Employed.	Departments.			Numbers Employed.
Blocks (B, C, D, F, G)	...	...	38	Laundry	...	...	17
Coaling	...	...	3	Work Room	...	...	9
Stores	...	...	3	Helpers in Blocks—			
Tailors' Shop	...	...	28	(A, I, K, L, M, N, O, J, H)	...	...	40
Shoemakers' Shop	...	...	19	Needlework in Blocks	...	...	3
Dispensary	...	...	1	Centre	...	...	2
Mat Making	...	...	1	Kitchen	...	...	4
Pavilions (A, B, C, D, E, F, G, H)	...	...	61	Corridor	...	...	4
Food Cart	...	...	1	Pavilions (J, K)	...	...	14
Total No. of Males employed	...	...	155	Total No. of Females employed	...	...	93
Total No. of Patients in Asylum	...	...	604	Total No. of Patients in Asylum	...	...	369

TABLE XI.—Showing the occupations of Patients in the Tailors' and Shoemakers' Shops.

OCCUPATIONS OF BOYS.	NUMBERS EMPLOYED IN EACH GRADE, WITH THE QUALITY OF THE WORK.			
	Indifferent.	Fair.	Good.	Excellent.
I. TAILORS—				
1. Preliminary Work	...	...	4	...
2. Sewing Seams and Linings	...	2	1	3
3. Felling	...	...	...	...
4. Buttonholing	...	...	1	2
5. Repairing	...	2	6	4
6. Machining	...	...	1	2
II. SHOEMAKERS—				
1. Preliminary Work	1	1	1	1
2. Closing Uppers	...	...	2	2
3. Repairing	...	1	2	3
4. Finishing	...	...	2	1
5. Riveting	...	...	2	1

28 Tailors and 20 Shoemakers.

TABLE XII. (continued)—Showing the progress of Children in the School during the year 1892.

						CLASSES.							Total.	
						1	2	3	4	5	6	7		
CLOCK LESSON—														
1	Know neither hours nor minutes	...	...	...	...	...	...	12	...	30	124	166		
2	Know some of the hours	...	...	...	...	...	...	12	20	...	28	3	63	
3	Know all the hours	...	...	...	...	...	9	20	20	10	...	4	...	63
4	Know the hours and quarters	...	...	...	...	...	20	16	10	...	...	...	...	46
5	Know the above and 5 minutes	...	...	...	...	...	6	2	4	...	...	...	...	12
6	Can tell the time to a minute	...	...	...	...	...	13	8	2	2	...	...	...	25
COLOUR LESSON—														
1	Recognise no colour	...	...	...	...	...	...	...	...	40	...	90	130	
2	Know the colour "red"	...	...	...	...	...	...	...	...	10	10	20	40	
3	Know one or two simple colours	...	...	...	...	...	...	...	20	...	40	10	70	
4	Know all simple colours	...	...	...	...	...	4	6	28	20	...	10	7	75
5	Know all simple and compound shades	...	...	...	...	...	28	30	12	4	7	2	...	83
6	Know and can match compound shades	...	...	...	...	...	16	10	8	...	2	...	...	36
KINDERGARTEN DRAWING—														
1	No knowledge of drawing at all	...	...	...	...	...	...	...	12	40	30	100	182	
2	Can make straight lines	...	...	...	...	...	...	...	4	...	20	20	44	
3	Can form outlines	...	...	...	...	...	...	10	20	24	9	10	7	80
4	Can draw objects	...	...	...	...	...	48	36	28	4	8	2	...	126
SHOP LESSON—														
1	Know no coins or weights	...	...	...	...	...	...	...	12	20	...	40	120	192
2	Know a few coins	...	...	...	...	...	...	...	20	20	...	20	7	67
3	Know a few coins and weights	...	...	...	...	...	12	20	20	4	...	2	...	58
4	Know all coins and some weights	...	...	...	...	...	14	12	6	...	...	...	...	32
5	Know all coins and weights	...	...	...	...	...	14	10	...	...	...	...	...	24
6	Coins, weights, and calculate fairly	...	...	...	...	...	8	4	...	...	...	...	...	12

ANNUAL REPORT OF THE AMBULANCE COMMITTEE FOR THE
YEAR 1892.

6th February, 1893.

*To the Managers of the
Metropolitan Asylum District.*

GENERALLY.

In submitting the Report for the year 1892, the Committee is able to state that 32,033 removals have been effected without injury to any person. This number is more than 15,000 in excess of any former year.

Discipline has been satisfactorily maintained throughout the service, and to the Superintendents and to the staff serving under them the Managers are indebted for a cheerful and willing performance of duty, without which the arduous tasks cast upon them by the great increase of removals could not have been efficiently discharged.

The Committee wishes also to record its high appreciation of the care and tact with which the nurses supplied for ambulance duty from the staff of the Hospitals adjoining the Ambulance Stations have performed their important duties.

No measures affecting the Ambulance Service were passed during the last Session of Parliament; but a Bill was introduced by the then President of the Local Government Board, and eventually withdrawn, entitled "The Casual Wards Bill," by which it was proposed that the Managers should be called upon to convey persons applying for admission to Casual Wards already full to other wards in more distant localities in which vacancies existed.

LAND SERVICE.

REMOVALS TO THE MANAGERS' HOSPITALS.—On reference to Appendix A, it will be seen that the total number of Fever patients removed to the Managers' Hospitals during the year was 16,118, as compared with 7,725 in 1891, 8,235 in 1890, and 5,680 in 1889. The removals of Smallpox patients numbered 306, as compared with 64 in 1891, 26 in 1890, and five in 1889.

The average daily removals of Fever patients in the first six months of

the year were 28·3, and the last six months 59·5, as compared with 17·12 and 25·53 respectively in 1891.

The aggregate removals during the year, including the transfer of patients from one hospital to another, numbered, as above stated, 32,033.

Appendix B exhibits the number of journeys made and miles run by the horses and vehicles during the year. The average length of journey of the Fever patients removed to hospital, as in former years, did not exceed $3\frac{1}{2}$ miles per patient.

Smallpox Patients.—Seven years have passed since Smallpox was epidemic in London; but its tendency to invade and re-establish itself in the Metropolis was clearly observable in the past year. In the first two months nine cases were admitted from six different districts of the Metropolis; the numbers rose to 48 in March and 30 in April, and in the first two weeks of May 39 cases were admitted. These cases were received from 20 out of the 30 Poor Law Districts, but the greater number arose in Shoreditch, Bethnal Green, and Whitechapel. This extended distribution of the disease occasioned some anxiety to the Committee, as it seemed to indicate the approach of an epidemic. At this time (May) all patients were being removed to the South-Eastern Hospital for examination, and they necessarily, in many instances, had to be conveyed considerable distances. In order, therefore, to lessen the length of the journeys, and to prepare for a possible large increase in numbers, the Committee decided to employ temporarily a Medical Officer for the River Ambulance Service, whose principal duty should be to inspect patients brought direct to the Wharves, with a view to revising the diagnosis in each case.

With the sanction of the Managers, Dr. P. H. Mackellar, who for many years was Medical Superintendent of the South-Western Hospital, was selected for the post, and entered on his duties on the 17th May.

The admissions to the Hospital Ships from the Metropolis continued at an increasing rate, and for the month of May they numbered 99, of whom 35 were from Shoreditch and 15 from Bethnal Green. In June, however, the number of admissions fell to 44, and a further considerable reduction occurred in July. It was then clearly evident that the danger of any further serious extension of the disease had been again averted, a happy result undoubtedly due to the united exertions of the Managers and the various local sanitary authorities; and the Managers were able to dispense with Dr. Mackellar's services on the 12th August. During the short period of Dr. Mackellar's engagement, out of 110 cases removed to the Wharves, 21 were at once returned to their homes as not suffering, in his opinion, from Smallpox.

Only a few sporadic cases occurred from July up to the end of October,

but in November 19 cases were admitted, including nine from one house in Islington. During December also there were 40 cases admitted from 17 different districts, nine being from Salvation Army shelters and Casual Wards. It is therefore evident that great care and watchfulness must be exercised in the next few months if the onset of the disease is to be again successfully met.

Altogether, during the 12 months there were 368 patients certified to be suffering from Smallpox removed from their homes, but only 298 of the cases were permitted to proceed to the Hospital Ships by the Medical Officers who inspected the patients before they were embarked on the ambulance steamers. Of the 70 patients who, in the opinion of those officers, were not suffering from Smallpox, 67 were returned to their homes, and three were admitted into Fever Hospitals. In the course of the year five patients who were admitted into the Fever Hospitals certified as being the subjects of fevers were discovered to have Smallpox, and were sent on to the Hospital Ships. One of these was the first of the series of Smallpox cases which occurred in Islington parish. This patient was actually peeling from Scarlet Fever when admitted, and a few days after she exhibited the characteristic symptoms of Smallpox.

Fever Patients.—At the commencement of the year there were 1,841 patients in the Managers' Hospitals, distributed as follow:—

Hospital.	Scarlet.	Diphtheria.	Typhus.	Enteric.	Other Diseases.	Total.
Eastern Hospital ...	228	50	—	44	2	324
North-Western Hospital	270	35	—	15	1	321
Western Hospital ...	107	16	—	21	1	145
South-Western Hospital	205	41	—	26	2	274
South-Eastern Hospital	191	19	4	78	1	293
Northern Hospital ...	433	29	—	22	—	484
Totals	1,434	190	4	206	7	1,841

This was a less number by 84 than at the beginning of the preceding year. The number under treatment fell to the minimum (1,438) for the year by the 5th March. After this date the number rose slowly to 1,542 on the 17th April, and then somewhat rapidly to 1,798 on the 14th May. At this comparatively early period of the year it became evident to the Committee that the increase in the number of patients admitted to, and under treatment in, the Managers' Fever Hospitals indicated the urgent need of additional accommodation, and they warned the Board that at the then rate of increase—187 patients weekly—the existing vacant beds at the

several Hospitals would all be occupied by the beginning of July, a date which experience has shown is usually the commencement of the Scarlet Fever season.

The Managers, recognising the gravity of the situation, at once empowered the General Purposes Committee to provide such additional accommodation for Fever patients as they might consider necessary. That Committee, in the first instance, arranged for an increase of the beds in the wards of the Hospitals, for the diversion of rooms hitherto in use for other purposes, for the opening for the reception of Scarlet Fever convalescents of the Gore Farm Hospital at Darenth (erected for convalescing Smallpox patients), and for the erection of temporary huts in the grounds of several of the Hospitals. But the constant increase in the number of cases notified showed that the disease was still spreading, and that the Managers would, if they were not to refuse admission to patients, be obliged to adopt further measures. A proposal by the Managers to the Local Government Board for the use of a Metropolitan Workhouse was rejected. The Managers had already revived a proposal made in April, 1891, for the purchase of a site at Tottenham for a hospital for the relief of the Eastern districts, but which had been abandoned in deference to the views expressed by the Local Government Board. The Committee will not refer to the delays which ensued, and the difficulties with which the Managers had to contend, before the Local Government Board gave its sanction to the purchase of this site. It will suffice to say that, on the 11th August, its purchase was sanctioned by the Board, and on the 22nd of the month, at which time the local cricket clubs were playing on the ground, the Managers took possession. On the 8th October, Messrs. A. & C. Harston, Architects, who had been given exceptionally full powers to erect a temporary Hospital on the site, were able to hand over the first wards of the new hospital, and others being brought into use as rapidly as they could be furnished and officered, within a week upwards of 200 patients were admitted.

In the meantime, however, and before the first wards of the North-Eastern Hospital (as the new hospital at Tottenham was designated) were ready, the accommodation at the disposal of the Managers had become entirely exhausted, and for some time applications for the removal of patients had to stand over from day to day until vacancies were created in the Hospitals by deaths or by the discharge of recovered patients. In selecting the cases for removal each day, preference was given to those patients whose surroundings and conditions of life were such that detention in their homes would be most prejudicial to themselves or to the community at large.

Efforts were also made to keep a few beds in reserve for patients who, in ignorance of the nature of their illness, applied for treatment at the out-

patient departments of the general hospitals, and who, if not admitted to the Managers' Hospitals, must have been returned to their homes, there to become centres for the further spread of disease. Unfortunately, in a few instances the number of beds so reserved was unequal to the demands, and some patients were obliged to be conveyed home by the Board's ambulances. In the case of a girl of thirteen who was thus taken back to her home, the nurse on her return to the Ambulance Station reported that the child's parents, with several children, occupied but one room, that they had no bedding whatever, and that the poor sufferer had been placed on a few rags in a corner of the room. It was felt that the child must not be allowed to remain under such conditions for a single hour, if it could possibly be avoided, and that removal, even to the most crowded ward of a hospital, was infinitely preferable in the interests of the patient and the public. The ambulance was therefore sent a second time, and room made for the patient at one of the Hospitals.

The highest number of Fever patients under treatment at one time during the year was attained on the 17th November, when 4,389 patients were in hospital.

It may not be out of place here to refer to the large numbers of patients who were admitted during the year from the undermentioned schools and other large institutions:—

The Foundling Hospital	...	...	...	127 cases.
The Patriotic Schools, Wandsworth			...	42 „
The Stockwell Orphanage	...	...	...	14 „
Dr. Barnardo's Home, Stepney		65 „
The Convent, Carlisle Place, Westminster				58 „
Trewint, Haverstock Hill	27 „

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Apart from these cases, which ought perhaps to have been provided for in isolation buildings attached to the institutions of which they were inmates, it does not appear that any cases other than those fully entitled to claim admission to the Board's Hospitals were admitted. The Hospitals are supported by the public rates, and in the interests of public health Parliament has been pleased to give every inhabitant of London a perfect right to admission and to gratuitous treatment. Provided that the Hospitals are conducted (as it is to be hoped they always will be) with every regard to the interests of the patients, it is not to be expected that the proportion of persons admitted to the total attacked will be lessened; it may rather be expected to increase.

Prior to the introduction of compulsory notification into London by the Act of 1889, it was not possible accurately to ascertain the proportion which the number of Scarlet Fever cases admitted to the Board's Hospitals bore to the total number attacked. But it was known that for some years that proportion had been slowly increasing, and in 1887 this growing tendency of the public to secure the advantages of hospital treatment for the infectious sick received an important impetus from the action of the Local Government Board, who, in July of that year, sanctioned the admission of patients to the Hospitals simply upon the certificate of any duly qualified medical practitioner, and without the intervention of any Relieving Officer or other Poor Law official. The introduction of compulsory notification has also materially assisted to further increase the proportion of cases admitted to hospital, and has besides enabled the Board to accurately estimate that proportion. Thus, in 1890, of the total number of Scarlet Fever cases notified, 42 per cent. entered the Board's Hospitals, and the proportion had further increased in 1892 to about 50 per cent.

It is therefore evident that the permanent accommodation at present at the Managers' disposal will have to be considerably augmented if the growing demands of the Metropolis are to be adequately met. Eventually, no doubt, the segregation of such large numbers of patients may be expected to result in a material reduction in the prevalence of fever, and a corresponding permanent lowering of the annual death-rate; indeed, such results appear already to be taking place.

Discharge of Scarlet Fever Patients from Country Hospitals.—As in previous years, the system with respect to the patients who have completed their recovery at the Convalescent Hospitals at Winchmore Hill and Gore Farm has been to convey them in convenient numbers to one of the London Hospitals nearest to their homes, and to discharge them there. The Hospitals generally selected were the Eastern, the Western, and the South-Eastern Hospitals. But the numbers now discharged in a single day are so much greater than formerly, that it is a matter of considerable difficulty to arrange for them to be bathed and clothed and handed over to their friends in proper time. It therefore appears desirable that the North-Western and South-Western Hospitals (particularly the latter) should also take their share of this work. The accommodation for discharging patients at the latter Hospital is, however, said to be far too limited for this extra work to be undertaken until the additional discharging-rooms which are about to be erected are complete.

Enteric Fever Patients.—The accommodation for this class of patients was, so soon as it became evident that every available bed would be required for the Scarlet Fever cases, reduced to the lowest point, and arrangements

were made with the general hospitals for the reception of such cases as the Managers might be unable to accommodate. Fortunately, however, no serious outbreak of the disease occurred in any part of London, and only eight cases were removed to the general hospitals.

Diphtheria Patients.—The total number of patients removed to the Managers' Hospitals, certified at the time of removal to be suffering from this disease or from "Diphtheritic Membranous Croup," was 2,349, as against 1,481 in 1891, 1,049 in 1890, and 770 in 1889. Of that number 40 per cent. were removed during the first half and 60 per cent. during the second half of the year.

PATIENTS CONVEYED TO OTHER PLACES THAN THE MANAGERS' HOSPITALS. — Under the powers conferred by Section 79 (3) of the "Public Health (London) Act, 1891," 404 persons suffering from dangerous infectious disorders were conveyed in the Managers' ambulances during the year 1892. Of these 67 were stated to have Measles, 215 Scarlet Fever, 35 Enteric Fever, 25 Diphtheria, 38 Erysipelas, four Smallpox, four Puerperal Fever, one Typhus Fever, one Continued Fever, nine Influenza, and five Cholera. Of the total number removed, no fewer than 191 were conveyed from different distant parts of London to the London Fever Hospital, Liverpool Road, Islington.

The total sum received by the Managers under this section of the Act during 1892 was £126 4s., of which £22 12s. 6d. was in respect of the services of nurses. A copy of the regulations relating to the removal of patients to the Managers' Hospitals and to other places is annexed (see Appendix D).

A few special remarks may be made regarding the Cholera and Influenza cases removed.

Cholera.—The severe outbreak of Asiatic Cholera in Hamburg induced the Local Government Board on the 24th August to request the Managers to place themselves in communication with the authorities of the hospitals, infirmaries, and similar institutions in London, with the view of arranging what accommodation could be placed at the disposal of the Managers for Cholera patients, in the event of the necessity arising.

The Managers immediately appointed a Special Committee with the fullest possible powers to deal with the whole matter, and in a short time a number of beds in various institutions had been placed at the Managers' disposal.

Pending the establishment of a Special Cholera Ambulance Service by the Special Committee, the Ambulance Committee gave instructions for the supply of litters to each of the three Ambulance Stations from those ordered when an outbreak of this disease was expected in 1884, and which had remained in store at South Wharf. It would appear, however, that removal

by the ordinary horse ambulances would, in the event of an outbreak of this disease, be generally preferred, as the persons making the applications for the removal of each of the five cases which were removed desired that the ordinary vehicle should be employed.

Influenza.—In the Report for 1891 the Committee expressed their regret that by the “Public Health (London) Act, 1891,” it was made necessary, in order to extend the provisions relating to the conveyance of infectious diseases beyond those specified in the Act, that the London County Council should make a formal order to that effect, and they pointed out that, although the Council would undoubtedly be always ready to promote the public interests in that direction, yet the requisite formalities entailed delay, and delay at the commencement of an epidemic was apt to cause greater mischief than could be repaired by any subsequent efforts.

The outbreak of Influenza in the winter of 1891-2 afforded a practical demonstration of the difficulties which the Committee had foreseen. In January applications began to be made for the removal in the Managers’ ambulances of persons suffering from this disease, but the Managers were unable to comply with them, owing to the limitation of their powers by the Act before referred to. Representations on the subject were made to the Managers, and they, on the 9th January, empowered the Committee to take action in the matter. The Committee consulted the Royal College of Physicians on the subject, and, having decided that it would be in the public interest for the ambulances to be made use of for this purpose, they made application to the London Council Council to issue the necessary order, and applied to the Local Government Board for their sanction to any expenditure which might be incurred by the employment of the vehicles as proposed pending the issue of the Council’s order. On the 3rd February, the London County Council, as a matter of urgency, made a temporary order extending the provision of the Public Health Act to Influenza for three months.

By this time, however, the disease began to lessen in prevalence, and altogether only nine cases were removed.

AMBULANCE STATIONS.—The Eastern, Western, and South-Eastern Stations have been maintained in complete repair, except the wood paving at the Eastern Station, which it has been arranged to replace by a more permanent material. The work connected with the enlargement of the Western Station is completed.

STAFF.—The weekly amount of wages paid to the staff (excluding the Superintendents and Housekeepers) was lowest in March, namely, £181 13s. 5d., but in November the amount had been increased to £288 1s. 2d.

RIVER SERVICE.

STEAMERS.—The three Ambulance Steamers “Red Cross,” “Maltese Cross,” and “Albert Victor,” and the steam pinnace “Swallow,” underwent the usual Board of Trade survey, and their passenger certificates have been renewed.

The distance run collectively by the steamers was 10,977 miles, and they conveyed 1,389 patients and other passengers, and 9 tons 37 lbs. of stores, &c., to and from the Hospital Ships at Long Reach (see Appendix C).

The Managers’ steamers caused no damage to any vessel or craft during the year; but, as in former years, several barges and other craft have come into collision with the steamers while lying at their moorings. The damage sustained has been in every instance made thoroughly good, and the total amount recovered in respect thereof during the year was £531 0s. 9d., making a total of £1,459 3s. 4d. recovered since 1885, in which year the present system of insurance against damage of all kinds without the usual restrictive clauses was first adopted.

WHARVES, &C.—The wharves and piers and the houses and other buildings in connection therewith at Fulham, Rotherhithe, and Blackwall, continue to be maintained in a satisfactory state of repair.

STAFF.—During the prevalence of Smallpox it was found necessary to engage sufficient men to form a second crew for the steamers, but on the disease declining their services were dispensed with.

COST OF AMBULANCE SERVICES.

The total payments made during the year ended on the 31st December last were as under:—

	£	s.	d.
For the Eastern Station	3,345	0	11
„ South-Eastern Station	3,620	16	1
„ Western Station	3,561	19	11
	<hr/>		
	£10,527	16	11
	<hr/>		
Expenditure out of Loan — Enlargement of Western Station	£2,981	13	9
	<hr/>		
River Service	£4,830	0	3
To which must be added—			
(1) Payments for overhauling machinery of and repairs of the Steamers	535	10	9
(2) Erection of staff dressing- rooms at South Wharf	£120	0	0
(3) Painting, &c., works at West Wharf	199	2	6
	<hr/>		
	319	2	6
	<hr/>		
	£5,684	13	6
	<hr/>		

In the expenditure at the three Ambulance Stations is included a sum of £850 for five ambulances, five omnibuses, and one cab, which were required to replace worn-out vehicles, and to meet the increased work of the service.

The expenditure out of the General Account in respect of the three Ambulance Stations during 1892 was 47 per cent. in excess of that of 1891, but the work of 1892 exceeded that of 1891 by no less than 149 per cent.

With regard to the ambulance nurses, who have, as in previous years, been drawn from the Hospitals in proximity to the Ambulance Stations, it may be mentioned that, for purposes of account and comparison as between the different institutions of the Board, the cost of their services has been assumed to be fairly represented by a fixed charge of 2s. 6d. per journey, and in the aggregate these charges amount to no less a sum than £1,900 for the past nine months.

(Signed) AUGUSTUS C. SCOVELL,
Chairman of Committee.

APPENDIX A.—LAND AMBULANCE SERVICE.

Number of Patients removed by the Ambulances of the Board.

	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	Totals
FEVER:—													
From homes to } Hospitals ... }	356	1,472	1,733	2,329	1,723	2,151	6,394	5,050	5,680	8,235	7,725	16,118	58,966
Convalescents to } Northern and } other Hospitals }	...	...	...	...	...	...	1,793	2,455	1,731	3,508	2,392	7,682	19,566
Recovered cases } from Northern } Hospital to } Town Hospitals } for discharge... }	...	...	...	...	...	...	1,088	2,710	1,372	3,084	2,206	4,572	15,035
Ditto Northern } Hospital trans- } ported from } Eastern Hos- } pital to South- } Eastern Hos- } pital ... }	...	...	...	...	...	...	...	...	...	...	...	100	100
Ditto, Gore Farm } Hospital to } Town Hospitals } for discharge... }	...	...	...	...	...	...	...	...	...	309	137	2,205	2,651
Ditto Gore Farm } Hospital trans- } ported from the } South - Eastern } Hospital to the } Western, South } Western and } Eastern Hos- } pitals ... }	...	...	...	...	...	...	...	...	...	...	...	183	183
From Hospitals to } homes ... }	...	...	*463	1,087	245	110	212	300	125	136	140	220	3,033
Total Fever Patients	356	1,472	2,196	3,416	1,968	2,261	9,487	10,515	8,908	15,272	12,600	31,080	99,535
SMALLPOX:—													
From homes to } Hospitals and } Wharves ... }	624	562	348	6,099	6,091	125	62	64	5	26	64	306	14,316
From Hospitals to } Wharves ... }	...	...	...	3,152	1,573	23	49	62	5	26	63	200	5,155
Other transfers ...	...	...	...	...	...	...	...	...	...	...	...	5	5
From Hospitals } and Wharves to } homes... }	...	...	...	4,324	5,934	69	18	13	...	...	...	10	10,331
Total Smallpox } Patients }	624	562	348	13,575	13,598	217	129	139	10	52	127	521	29,915
Conveyance of } Patients to } other places } than Managers' } Hospitals ... }	...	...	...	...	...	...	...	1	4	125	126	432	685
Grand Totals ...	980	2,034	2,544	16,991	15,566	2,478	9,616	10,655	8,922	15,449	12,853	32,033	130,750

* Includes some Smallpox Cases.

N.B.—(1) The Eastern Ambulance Station commenced work on the 14th July, 1881, at London Fields; the South-East Station on the 1st October, 1883; and the Western Station on the 9th July, 1884.

(2) The use of the Managers' ambulances for the general conveyance of the infectious sick was not authorized until the 30th November, 1889.

APPENDIX B.—LAND AMBULANCE SERVICE—(continued).

Return of Work for the Twelve Months ended 31st December, 1892.

PARTICULARS OF WORK.	Number of Journeys.	MILES RUN.					By Vehicles.
		By Horses.					
		1	2	3	4		
REMOVALS FROM HOME—							
Fever Patients to London } Hospitals }	14,611	128,384	775	...	...	129,159
Smallpox Patients to London } Hospitals }	168	1,917	51	...	...	1,968
Smallpox Patients to Wharves	78	1,035	...	...	...	1,035
Non-Smallpox Patients returned } home }	107	1,323	50	...	...	1,373
Other Patients returned home ...	85	586	...	...	...	586
Patients sent for, but for various } causes not removed }	320	2,334	30	...	...	2,364
TRANSFERS BETWEEN HOSPITALS—							
Fever Convalescents to and } from Northern Hospital ... }	612	1,390	13,606	...	987	15,983	
Fever Convalescents from } Gore Farm Hospital ... }	329	33	9,707	...	2,536	12,276	
Fever Convalescents to other } Hospitals }	245	1,687	2,796	...	...	4,483
Smallpox Patients to Wharves	158	809	...	...	...	809
Patients from Long Reach to } London Hospitals }	4	...	120	...	...	120
RECOVERED PATIENTS TAKEN HOME—							
From Hospitals:—Fever ...	188	1,530	...	...	...	1,530
From Wharves:—Smallpox...	8	69	50	...	...	119
Service Requirements	274	1,556	60	...	12	1,628	
Conveyance of Ambulance } Committee }	3	...	23	...	...	23
	17,190	142,653	27,268	...	3,535	173,456	
CONVEYANCE OF PATIENTS TO OTHER PLACES THAN MANAGERS' HOSPITALS							
	417	4,953	229	...	...	5,182
Totals for 1892	17,607	147,606	27,497	...	3,535	178,638	
Totals for 1891	8,254	66,129	12,958	...	791	79,873	
Totals for 1890	8,644	67,443	14,167	415	2,405	84,423	
Totals for 1889	5,594	40,957	6,276	232	881	48,346	
Totals for 1888	5,550	34,842	12,767	...	1,910	49,519	
Totals for 1887	6,507	51,894	5,223	...	1,009	58,126	
Totals for 1886	2,073	13,578	1,980	...	...	15,558
Grand Totals	54,229	422,449	80,868	647	10,531	514,483	

APPENDIX C.—RIVER SERVICE.

Number of Patients, Visitors, Staff, &c., conveyed to and from the Hospital Ships during the year 1892.

MONTH.	Patients conveyed to Hospital Ships.	Recovered cases conveyed from Hospital Ships.	Visitors conveyed to and from Hospital Ships (including Managers).	Staff, &c., conveyed to and from Hospital Ships.	Totals.
January	4	...	...	29	33
February	4	5	...	15	24
March	48	6	...	14	68
April	30	27	...	31	88
May	96	46	25	81	248
June	38	74	73	198	383
July	12	44	15	176	247
August	5	4	...	37	46
September	2	7	6	22	37
October	3	1	...	35	39
November	19	2	...	29	50
December	37	19	2	68	126
Totals for year 1892	298	235	121	735	1,389
Totals for 1891	63	53	155	503	774
Totals for 1890	26	25	38	339	428
Totals for 1889	5	4	51	445	505
Totals for 1888	62	63	246	476	847
Totals for 1887	54	45	395	478	972
Totals for 1886	130	145	458	*3,929	4,662
Totals for 1885	5,468	5,809	†	†	11,277
Totals for 1884	5,592	4,267	†	†	9,859
Grand Totals... ..	11,698	10,646	1,464	6,905	30,713

STEAMERS.

STEAMER.	Fires alight.		Under Steam.		Under Way.		Coal consumed.		Number of days when under steam.	Distance run. Miles.
	Hours.	Mins.	Hours.	Mins.	Hours.	Mins.	Tons.	Cwt.		
"Red Cross"... ..	1,002	50	879	35	282	43	126	14	91	2,991
"Maltese Cross" ...	1,067	33	852	29	325	6	144	12	105	3,295
"Albert Victor" ...	991	1	847	55	282	7	146	9	99	3,188½
"Swallow"	399	50	271	50	177	32	14	10	57	1,503
Totals	3,469	14	2,851	49	1,067	28	432	5	352	10,977½

Quantity of Stores, Parcels, &c., conveyed to and from the Hospital Ships.

Number, 234. Weight, 9 tons 37 lbs.

* Included in this number is the number of Contractors' workmen who were engaged on building and other work in connection with the Hospital Ships, and who were conveyed to and from Long Reach each week.

† No figures were given in the Committee's Annual Report for 1884 and 1885.

APPENDIX D.—AMBULANCE SERVICE.

Removal of Persons suffering from Infectious Diseases.

1. Apply on Week Days between 9 a.m. and 8 p.m.,
- | | | | |
|---|--------------|---|--|
| } | To the Chief | } | Postal Address: Norfolk House, Norfolk Street, Strand, W.C. |
| | Offices: | | Telegraphic Address: Asylums Board, London.
Telephone Number, 2587. |

N.B.—Applications in the latter part of the day must be dispatched in time to reach the Offices before 8 p.m.

- | | | | | | |
|---|--|---|----------------------------|---|--|
| } | At Night, between 8 p.m. and 9 a.m., and on Sundays, Christmas Day, and Good Friday, | } | To the Ambulance Stations: | } | Eastern Ambulance Station, Brooksby's Walk, Homerton, N.E. |
| | | | | | South-Eastern Ambulance Station, New Cross Road (near Old Kent Road Railway Station), S.E. |
| | | | | | Western Ambulance Station, Seagrave Road, Fulham, S.W. |

2. REMOVAL TO THE BOARD'S HOSPITALS.

(a) Only persons suffering from Smallpox, Fevers, or Diphtheria are admitted into the Board's Hospitals.

(b) Every application must state the name, age, and full address of the patient, from what disease suffering, and in cases of fever the particular kind of fever; and also the name of the person making the application.

(c) Unless a Medical Certificate be handed to the Ambulance Nurse the patient will not be removed.

(d) Patients should leave all valuables, money, &c., and all outside clothing at home, should wear body linen only, and be wrapped in the blankets provided for the purpose.

(e) The Ambulance Nurse will leave, at the house from which the patient is removed, a notice stating the Hospital to which the patient is to be taken, and a copy of the regulations as to visiting, &c.

3. CONVEYANCE TO OTHER PLACES.

(a) Persons suffering from any Dangerous Infectious Disease may be conveyed by Ambulance to places other than the Board's Hospitals.

N.B.—Dangerous Infectious Diseases include the following: Smallpox, Cholera, Diphtheria, Membranous Croup, Erysipelas, Scarlatina or Scarlet Fever, Typhus, Typhoid, Enteric, Relapsing, Continued, and Puerperal Fevers, and Measles.

(b) Every application for an Ambulance must state:—

- (i.) Name, sex, and age of patient.
- (ii.) Description of disease, and in the case of fever, the particular kind of fever.
- (iii.) Full address *from* which the patient is to be conveyed.
- (iv.) Full address *to* which the patient is to be conveyed.

(c) The patient must be provided with a Medical Certificate of the nature of the disease, to be handed to the Driver of the Ambulance.

(d) The charge for the hire of the Ambulance, including (when the patient is over ten years of age) the services of a male attendant, is 5s. This amount must be paid to the Driver, who will give an official receipt for the same.

(e) One person only will be allowed to accompany the patient, and such person may be conveyed back to the place from which the patient was conveyed. If desired, a nurse will be supplied at an additional charge of 2s. 6d. for her services.

(f) The Ambulances may be sent outside the Metropolitan district only by special sanction of the Ambulance Committee or of the Clerk to the Board, and in such cases an extra charge will be made of 1s. for every mile outside the Metropolitan area.

4. The Drivers of the Board's Ambulances are not allowed to loiter on their journeys or to stop for refreshments, on pain of instant dismissal. It is particularly requested that any breach of this regulation, or any neglect or incivility on the part of the Drivers, Nurses, or Attendants may be immediately reported to the undersigned.

The Servants of the Board are forbidden to accept any gratuities or refreshments.

By Order, T. DUNCOMBE MANN,

Clerk to the Board.

Dated 25th January, 1892.

N.B.—PENALTY—By Section 70 of the "Public Health (London) Act, 1891," it is enacted that—"It shall not be lawful for any owner or driver of a public conveyance knowingly to convey, or for any other person knowingly to place in any public conveyance, a person suffering from any dangerous infectious disease, or for a person suffering from any such disease to enter any public conveyance, and if he does so he shall be liable to a fine not exceeding £10"

ANNUAL REPORT FOR 1892 OF THE COMMITTEE OF MANAGEMENT OF THE TRAINING SHIP "EXMOUTH."

January, 1893.

To the Managers of the
Metropolitan Asylum District.

The Committee for the Training Ship "Exmouth" beg to submit the 17th Annual Report (for 1892) of the Captain-Superintendent, and in doing so take the opportunity of briefly reviewing the matters with which they have to deal in the course of the last 12 months.

On reference to the statistics, it will be seen that during the year 322 boys were admitted and that 270 were discharged.

Of those discharged, 83 entered the Royal Navy, as against 89 in the year 1891; 69 entered the Mercantile Marine, as against 75; 66 entered the Army as musicians, as against 42; while 51 were returned to their respective parishes and unions, leaving 539 under training on the 31st December last. There was only one death.

The net expenditure incurred during the 12 months ended at Michaelmas last, excluding "works of a special character," was £19,239 13s. 2d., as against £18,371 0s. 1d. for the previous 12 months. The charge made upon the several Parishes and Unions for the maintenance and clothing of the boys during the half-years ended at Lady-day and Michaelmas, 1892, was at the rate of 10 $\frac{3}{4}$ d. and 11d. per head per day, as against 10d. and 11d. for the corresponding periods of 1891.

The total daily cost of the maintenance and clothing, &c., of the boys (exclusive of the repayment, with interest, of the amount raised on loan) is shown in the following statement, viz. :—

ITEMS.	Half-year ended Lady-day, 1892.	Half-year ended Michaelmas, 1892.
	s. d.	s. d.
Provisions, Necessaries, and Clothing	0 10 $\frac{24}{32}$	0 11
Warming, Cleansing, Lighting, and Water	0 2 $\frac{6}{32}$	0 2
Officers' Salaries, Rations, and Uniforms	0 7 $\frac{13}{32}$	0 6 $\frac{26}{32}$
Furniture and Repairs, Rates and Taxes, and Sundries	0 4 $\frac{28}{32}$	0 3 $\frac{19}{32}$
Total Daily Cost per Boy	2 1 $\frac{7}{32}$	1 11 $\frac{13}{32}$

In addition to the above, a sum of £1,041 3s. 7d. was expended in

providing outfits for boys going to sea, including their travelling expenses, the daily cost being $2\frac{3}{4}$ d. per boy, as against 3d. in the year 1891.

It is a source of great satisfaction to the Committee to be able to record the increased number of admissions to the ship, whereby the 113 vacancies which existed at the end of 1891 were reduced to 61 at the end of 1892.

To a certain extent this has been brought about by relaxing in some cases the standards of measurement governing admissions, but, as the standards controlling admissions to the Royal Navy have not been lowered, it follows that, for a time at any rate, the discharges to that most desirable branch of the sea service will be reduced in number. It cannot be said that increase in the admissions is due to the opportunity now afforded to Country Union Boards to send boys to be trained, seeing that only four of such Boards (out of the 114 who were informed of it) had up to the end of the year expressed a wish to enter into an agreement with the Managers for the maintenance and training of boys, and only six were on board on the 31st December last.

It is to be hoped, however, that the Metropolitan Boards of Guardians will avail themselves more fully than they have done during the last two or three years of the excellent opportunity which an institution like the "Exmouth" affords them of placing healthy boys in a position where after a short time they no longer continue a burden to their parents or relatives, or a charge upon the rates, but are enabled, as a result of the sound and healthy training they have received, to support themselves in an honourable and praiseworthy manner—many of them in the service of their country.

The Committee would specially commend to Boards of Guardians and Managers of Districts Schools this effective method of providing for the future of boys who are orphans or deserted.

The annual inspection was held on Saturday, the 2nd July, and passed off most satisfactorily. The only regret attending it was that the Managers were, much to their disappointment, unable to invite the presence of Guardians and others interested in the work of the ship, to witness the excellent results shown, inasmuch as the cost of providing visitors with necessary refreshments on such occasions is held by the District Auditor to be illegal, and the Local Government Board have intimated that they will positively decline to remit any future surcharges that he may make in respect of expenditure of this kind.

With the desire, as the Committee believe, of assisting to fill up the vacancies, the West London School District Board inquired in May if the Managers were willing to enter into an agreement to receive a detachment of boys on the "Exmouth" for a period of not less than six months, and if so, upon what terms. As the Managers have had no power given to them

to make arrangements of this kind, the District Board were informed that the Managers would be glad to receive the boys referred to if strong and healthy, and would undertake that none of them should be discharged to any occupation without one month's previous notice to the Guardians to whom the boys might be chargeable.

The area of the boys' playground adjoining the Infirmary has been slightly reduced by the resumption of possession by the freeholder, Mr. Theobald, of ground, 1 rood 34 poles in area, for building purposes. The abatement in rent is £7 per annum, dating from Lady-day, 1892.

A revision of the scale of wages of subordinate officers (which had been in force for 16 years) was made in June with satisfactory results, especially as regards the Assistant Schoolmasters.

As was foreshadowed in the Committee's last Annual Report, the question of the water-supply has had to be further considered. The result has been that the Managers have agreed to contribute the sum of £81 (*plus* a few fees) towards the cost (about £250) of laying a water-main in the river wall from Seabrook's Wharf at Grays to the "Shaftesbury" causeway.

The most active part in the negotiations has been taken by the "Shaftesbury" Committee of the School Board for London, with whom an agreement has been entered into for the joint use and maintenance of the water-main.

Agreements in respect of this matter have also had to be entered into with the Commissioners of the Rainham and other levels, whose permission to the laying of the main has been obtained on certain conditions, and with the freeholder of the land upon which the river wall is constructed. Under the agreement with the last-mentioned a rental of £2 10s. per annum is payable by the Managers of both the "Exmouth" and the "Shaftesbury" in respect of the "easement."

In October, the Rev. Canon Whittington, the Rector of Orsett, submitted his resignation of the office of Chaplain of the "Exmouth," having made arrangements for an exchange of his rectorial duties with the Chaplain at Stuttgart. During his five years' service as the "Exmouth" Chaplain, Canon Whittington did a great deal of good work amongst the boys, and it is hoped and believed that his spiritual and moral teachings will not easily be effaced from those who came under his influence.

The Managers have, on the unanimous recommendation of the Committee, appointed as his successor the Rev. F. Haslock, of All Saints, Grays, who had occasionally done temporary duty for Canon Whittington to the complete satisfaction of the Committee. A short report from the new Chaplain will be found inserted in the Captain-Superintendent's Report (see page).

During several months of the year the Committee gave attention to an entirely new subject in connection with the maintenance of the boys, viz., the condition of their teeth. The question has recently become one of considerable importance to all pauper school authorities, and it has a special importance in institutions like the "Exmouth," seeing that a candidate for the Royal Navy may be rejected solely on account of irregular or defective teeth, notwithstanding that in all other respects he may be a most desirable applicant. As a preliminary step, the Committee obtained a report from the Honorary Secretary of the British Dental Association, Mr. W. B. Paterson, F.R.C.S., L.D.S., who, in conjunction with Mr. H. Baldwin, M.R.C.S., L.D.S., voluntarily devoted a considerable amount of time to a thorough examination of the teeth of 480 of the boys.

This report, which was communicated to the Managers on the 10th December (see Board Minutes, Vol. XXVI., p. 644), included a recommendation by Mr. Paterson that a qualified Dental Surgeon should be appointed, at a salary of £100 a year. At the close of the year the Committee were considering whether they would recommend the Managers to adopt Mr. Paterson's recommendation.*

Since the Managers have obtained a renewed lease of the premises known as Sherfield House, which is used as an Infirmary in connection with the ship, the question of utilising to greater advantage than heretofore the stable building on the premises has been carefully considered, and improvements have been made which enable the boys to bathe and wash in the lower part of the building with comparative comfort. The cost of this much-needed improvement was estimated at £72 9s.

The question of improving the upper part of the building so as to provide a suitable isolation ward for cases of infectious disease, with reasonable accommodation for a nurse, was under consideration at the end of the year.

In the early part of the year the Brigantine was thoroughly and satisfactorily repaired under the supervision of the Master, Mr. Hall, at a cost of £236 6s. 7d. Interesting information relating to the cruises of this vessel will be found in the Captain-Superintendent's report (see page).

The much-needed work of repairing, caulking, and painting the exterior of the hull of the ship has been carried out under the supervision of the Superintendent of the River Ambulance Service, Mr. C. Thomson, at a cost of £511, and the moorings of the ship have been examined and repaired by men in the employ of the Thames Conservancy, at a cost of £35 19s.

* On the 4th February, 1893, the Managers, on the recommendation of the Committee, authorised the appointment of a Dental Surgeon for one year, at a salary of £100.

Several changes in the constitution of the Committee took place on the occasion of its reappointment in April. From varying causes, Admiral Adeane, Mr. Birley, Mr. Ellis, Mr. Kemp, the Rev. D. Reith, and Captain Robertson-Shersby, ceased to be Members, and the following Managers were appointed on the Committee:—

Mr. Bolton.	Mr. Brown.	Mr. Dalton.
„ Francis.	Col. Grubb.	„ Scheib.

Once again it is the pleasing duty of the Committee to acknowledge with thanks the generosity of the following gentlemen in presenting prizes for five of the boys:—

Sir E. H. Galsworthy, J.P., D.L.	Mr. Taylor.
Mr. J. M. Goodall.	„ Walkley.
„ R. Strong, J.P.	

The gifts consisted of four silver watches and a silver medal.

As in several former years, the Committee again take this opportunity of recording an expression of their hearty thanks to Mr. Henry Halsey for his annual gift of six watches.

The Captain-Superintendent and the Officers have continued to discharge their various duties with efficiency, and the Committee have pleasure in again expressing their warm appreciation of the services they have thus rendered.

(Signed) R. STRONG,
Chairman.

P.S.—According to the Mercantile Navy List, published by the Registrar-General of Seamen, the number of boys entered into the Royal Navy from the “Exmouth” during 1892 was 83, whilst the aggregate number of similar entries from all the other Training Ships in the United Kingdom was 108.

TRAINING SHIP "EXMOUTH."

ANNUAL REPORT OF THE CAPTAIN-SUPERINTENDENT FOR
THE YEAR 1892.

1st January, 1893.

GENTLEMEN,

I have the honour to submit my Seventeenth Annual Report. A glance at the table hereunder will show that a greater number of boys have been admitted and discharged during the year 1892 than during 1891.

It is satisfactory to be able to report that *only one* death occurred.

BOYS ADMITTED AND DISCHARGED.

	1876	1877	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	Total.
Boys admitted	194	494	188	210	289	226	340	358	326	267	374	241	301	329	290	223	322	4,972
Boys discharged to Royal Navy	1	6	1	8	72	85	155	141	95	128	114	95	87	104	108	89	83	1,372
„ discharged to Mercantile Marine, of whom 36 were enrolled in the Royal Naval Reserve ...	53	19	126	115	105	107	109	96	106	91	107	93	141	171	134	75	69	1,717
„ discharged to Army as Musicians	9	11	9	31	17	27	46	74	61	43	55	36	18	56	48	42	66	649
„ discharged to situations, 3 of whom subsequently went to sea	1	...	2	...	3	...	...	...	2	...	...	...	...	...	...	1	...	9
„ discharged to their respective Unions, for various reasons, by order of the Boards of Guardians of the Unions and Parishes	21	23	47	30	61	43	27	33	52	39	49	44	45	44	36	18	51	663
„ died ... ..	...	...	2	1	...	4	1	...	2	2	5	1	2	1	1	...	1	23
Boys discharged	85	59	187	185	258	266	338	344	318	303	330	269	293	376	327	225	270	4,433
Total number of boys discharged																		4,433
Remaining under training, 31st December, 1892																		539
Total																		4,972

The number of boys discharged during the last 13 years averages 301·5 per year.

The following table shows the number admitted from each of the Metropolitan Unions and Parishes during the year 1892, also during the whole time the ship has been established, viz. :—

Year ending 31st December, 1892.	NAMES OF UNIONS AND PARISHES.	From 31st March, 1876, to 31st Dec., 1892.
3	City of London	91
17	Fulham	120
16	Greenwich	299
1	Hackney	131
16	Holborn	125
42	Lewisham	458
4	Mile End	129
36	Poplar	292
1	St. George's-in-the-East	80
10	St. George's Union	182
6	St. Giles, Bloomsbury	28
17	St. Giles, Camberwell	258
...	St. John, Hampstead	21
1	St. Leonard, Shoreditch	130
3	St. Luke, Chelsea	119
8	St. Mary, Islington	175
5	St. Mary, Kensington	134
9	St. Mary, Lambeth	266
17	St. Marylebone	417
6	St. Mary, Paddington	101
2	St. Matthew, Bethnal Green	116
6	St. Olave's	214
41	St. Pancras	253
21	St. Saviour's	239
4	Stepney	78
3	Strand	16
5	Wandsworth and Clapham	113
2	Westminster	35
6	Whitechapel	117
8	Woolwich	217
1	Bromley	1
2	Bedford	2
3	Strood	3
	Country Unions	
Total, 322		
	Chichester	1
	Croydon	2
	Dorking	1
	Ecclesall	1
	Epping	1
	Eton	1
	Horsham	3
	Tonbridge	1
	Wilton	1
	Total	4,972

These boys were in the Establishment when the Metropolitan Asylums Board took it over from the Managers of the Forest Gate District Schools.

Of the 3,089 boys discharged to sea service from 31st March, 1876, to 31st December, 1892—

1,372 entered the Royal Navy.

857 went into vessels in the Baltic and coasting trade and other short voyages, such as the Mediterranean, &c.

275 went into ships trading to North and South America.

101 went into ships in the West India Trade.

92 went into ships going to the East Indies, China, and Japan.

288 went into ships trading to the Australian Colonies.

104 went into ships trading to the Cape, Africa, and Mauritius.

Total 3,089

The positions the above 3,089 boys occupied on board the ships in which they first went to sea are as follows, viz. :—

1,372 entered the Royal Navy as boys.

356 shipped as ordinary seamen in the Mercantile Marine.

1,128 shipped as deck and cabin boys do.

104 shipped as apprentices do.

129 shipped as assistant cooks and stewards do.

Total 3,089

The boys discharged to the Army since the 25th March, 1876, joined the undermentioned Regiments as band boys, viz. :—

3 to the 7th Dragoon Guards.	5 to the King's Own Scottish Borderers.
1 ,, 3rd Hussars.	4 ,, Scottish Rifles.
1 ,, 4th Hussars.	7 ,, Royal Inniskilling Fusiliers.
1 ,, 11th Hussars.	2 ,, Gloucester Regiment.
1 ,, 13th Hussars.	6 ,, Worcestershire Regiment.
1 ,, 19th Hussars.	4 ,, East Lancashire Regiment.
9 ,, 20th Hussars.	6 ,, Duke of Cornwall's Light Infantry.
2 ,, 21st Hussars.	18 ,, Royal Sussex Regiment.
2 ,, 5th Lancers.	6 ,, Dorsetshire Regiment.
15 ,, Royal Artillery.	5 ,, South Lancashire Regiment.
1 ,, Royal Horse Artillery.	22 ,, Welsh Regiment.
1 ,, Royal Engineers.	3 ,, Royal Highlanders.
8 ,, Grenadier Guards.	10 ,, Oxfordshire Light Infantry.
4 ,, Coldstream Guards.	28 ,, Essex Regiment.
1 ,, Scots Guards.	4 ,, Leinster Regiment.
1 ,, Royal Marine Light Infantry.	1 ,, Army Hospital Corps.
8 ,, Yorkshire Regiment.	21 ,, Derbyshire Regiment.
3 ,, Lancaster Fusiliers.	5 ,, Loyal North Lancashire Regiment.
19 ,, Royal Scots Fusiliers.	10 ,, Northamptonshire Regiment.
8 ,, Cheshire Regiment.	4 ,, Berkshire Regiment.
11 ,, South Wales Borderers.	9 ,, Yorkshire Light Infantry.

36 to the Royal Scots, "Lothian Regiment."	27 to the Manchester Regiment.
5 ,, Royal West Surrey Regiment.	16 ,, York and Lancaster Regiment.
8 ,, East Kent Regiment.	11 ,, Durham Light Infantry.
7 ,, Northumberland Fusiliers.	5 ,, Highland Light Infantry.
3 ,, King's Liverpool Regiment.	2 ,, Seaforth Highlanders.
14 ,, Royal Warwickshire Regiment.	7 ,, Gordon Highlanders.
15 ,, Royal Fusiliers, "City of London."	10 ,, Royal Irish Rifles.
3 ,, Lincolnshire Regiment.	5 ,, Royal Irish Fusiliers.
2 ,, Devonshire Regiment.	28 ,, Connaught Rangers.
20 ,, Suffolk Regiment.	19 ,, Argyll and Sutherland Highlanders.
19 ,, Somersetshire Light Infantry.	16 ,, Rifle Brigade.
3 ,, West Yorkshire Regiment.	24 ,, Royal Dublin Fusiliers.
7 ,, East Yorkshire Regiment.	4 ,, South Staffordshire Regiment.
7 ,, Leicestershire Regiment.	1 ,, North Staffordshire Regiment.
8 ,, Shropshire Light Infantry.	6 ,, Border Regiment.
8 ,, Middlesex Regiment.	
20 ,, King's Royal Rifles.	649 Total.
2 ,, Wiltshire Regiment.	

SEAMANSHIP.

This subject has naturally held the leading position in our daily routine.

Every suitable occasion was taken advantage of to drill the boys aloft, and good work was done in bending, loosing, reefing, shortening, and furling sails, and in sending up and down top-gallant masts and yards.

Boat-pulling at all times, and sailing when the weather permitted, have proved especially attractive instructions, the results being most satisfactory.

Ample opportunity for practical work has been given the leading or Riggers' Class in keeping all sails, rigging, and ratlines in thorough order. Good work has also been done under the sailmaker's directions, in the course of which not only have the old rope and canvas been utilised, but 1,350 yards of new canvas and 56 fathoms of new rope have been brought into requisition.

The instruction in signalling has been carried on continuously. This is an important branch of the Service, in which several of our boys have rapidly distinguished themselves after entering the Royal Navy.

The evening winter routine has been so arranged that every boy receives instruction upon the compass, and also upon the various models of the Ship, Brigantine, &c., passing from one to the other in regular succession.

The number of promotions from one class to another will be seen below:—

From 5th or lowest to 4th Class	...	...	...	304
,, 4th ,, 3rd ,,	...	...	...	272
,, 3rd ,, 2nd ,,	...	...	...	151
,, 2nd ,, 1st ,,	...	...	...	176
,, 1st ,, Riggers (fit for sea)	...	...	...	123
				<u>1,026</u>

BRIGANTINE.

The Brigantine commenced her annual cruising trips early in April, and completed them at the close of September.

In May the vessel was sent to Portland and Devonport with boys for H.M. Ships "Boscawen" and "Impregnable," in which 18 of them were entered as bluejackets.

The trip, as usual, afforded excellent opportunities for the boys acquiring a knowledge of practical seamanship, and caused them all to volunteer for the Royal Navy.

While at Devonport the Brigantine and her youthful crew were again inspected by the Inspecting Captain of Boys' Naval Training Ships, who recommended 11 of the lads to the Admiralty for special entry.

Admiral Adeane also visited the Brigantine, and by his invitation the crew were shown over his flag ship, the "Anson," which was a great treat for the lads. They were taken to a great review of sailors and soldiers by the Duke of Edinburgh, and competed in the "Impregnable" boys' annual athletic sports, for which money prizes were awarded them.

Such annual trips to the naval ports develop the boys' intelligence and strength in a remarkable manner, while by their training and smartness in working the vessel in the presence of the Naval authorities at Devonport, they facilitate not only their own entry into the Service but that of other boys who are afterwards presented for entry from this ship.

The Brigantine is kept in good condition, and continues to be a valuable adjunct to the Training Establishment.

GUNNERY.

Of the large number of boys discharged during the past twelve months, 202 were drawn from the following classes:—

Leading Gunners...	...	...	...	...	...	...	75
1st Class	„	...	...	...	...	...	80
2nd	„	„	...	...	...	...	30
3rd	„	„	...	...	...	...	17
					Total	...	<u>202</u>

They all had a good knowledge of rifle, cutlass, and gun drill. The leading gunners, in addition to the above drills, have been taught field gun drill, which they go through to the satisfaction of all who see them.

GYMNASTICS.

The following figures will show the proficiency at the 1st January, 1892, and the numbers trained, discharged, and remaining on the 31st December, 1892:—

	January 1st, 1892.	December 31st, 1892.
In Special Gymnastic Class ...	60	34
„ 1st „ „ ...	170	100
„ 2nd „ „ ...	156	119
„ 3rd „ „ ...	20	216
„ 4th „ „ ...	80	70
Total ...	486	539

Certificates issued during the year 1892:—

From 4th Class to 3rd Class ...	...	...	...	322
„ 3rd „ 2nd „ ...	...	...	...	282
„ 2nd „ 1st „ ...	...	...	...	296
„ 1st „ Special „ ...	...	...	...	237
Total ...	...	...	...	1,137

The following table shows the result of the Competition for Gymnastic Prizes, which took place in June, 1892:—

No. on Ship's Books.	NAME.	No. on Watch Bill.	UNION OR PARISH.	No. of marks obtained.	PRIZES.	DESTINATION
4072	J. Marshall ...	70	Camberwell...	80	1st Prize, Silver Watch and Chain ...	Still on board
4407	G. Sayers ...	227	Poplar ...	78	2nd Prize, 15s. ...	Still on board
4323	W. Eldom ...	458	Greenwich ...	77	3rd „ 10s. ...	Still on board
4056	J. Davis ...	426	City of London	75	4th „ 7s. 6d.	M. Marine.
3981	F. Cox ...	278	Strand ...	75	5th „ 5s. ...	Royal Navy.
4366	C. Ross ...	177	St. Marylebone	71	6th „ 2s. 6d.	Still on board
4522	W. Alder ...	230	Paddington ...	68	... ..	Still on board
4318	F. Harding ...	538	St. Saviour's	67	... ..	Royal Navy.
4305	A. Anderton ...	218	St. Pancras ...	67	... ..	Still on board
4186	E. Saunders ...	443	Chelsea ...	66	... ..	M. Marine.
4063	S. Davis ...	292	City of London	66	... ..	Still on board
4219	R. Dutton ...	35	Greenwich ..	64	... ..	M. Marine.
4129	C. Mabbitt ...	377	Poplar ...	63	... ..	Still on board
4523	A. Glanfield ...	353	Paddington ...	62	... ..	Still on board
4281	W. Harding ...	488	Fulham... ..	62	... ..	Still on board
4527	H. Berkley ...	402	Fulham... ..	61	... ..	Still on board
4091	W. Pearmine ...	513	St. Olave's ...	60	... ..	Still on board
4333	H. Martin ...	437	St. Pancras ...	59	... ..	Still on board
4335	J. Lewis ...	366	St. Saviour's	59	... ..	Still on board
4248	J. Way ...	428	City of London	57	... ..	Still on board
4529	H. Sparey ...	584	Fulham... ..	52	... ..	Still on board
4553	B. Wilson... ..	242	St. George's .	51	... ..	Still on board
4413	A. Mullingar ...	372	St. George's, E.	49	... ..	Still on board
4232	W. Richardson	260	Lambeth ...	47	... ..	Still on board

The 1st Prize, a Silver Watch and Chain, was the gift of J. Goodall, Esq.

Money Prizes, divided as shown, allowed by the Training Ship Committee out of the interest on the legacy left to the Ship by the late Captain Brown.

SWIMMING.

The following figures show the number of boys trained during the year 1892 :—

Number of boys who could not swim on the 1st January, 1892	21
" " admitted during the year 1892	322
Total	<u>343</u>
Number of boys remaining on the 31st December, 1892, who could not swim	<u>22</u>
Number actually taught to swim	320
" passed into 4th Class from 5th	290
" " 3rd " " 4th	298
" " 2nd " " 3rd	169
" " 1st " " 2nd	186
" " Special " " 1st	128
Total	<u>1,391</u>

The following table will show the number of boys in the Swimming Classes on 31st December, 1891, and 31st December, 1892 :—

	1891.	1892.
In the 5th Class	22	28
" 4th "	34	89
" 3rd "	196	193
" 2nd "	49	64
" 1st "	45	23
" Special	140	142
Totals	<u>486</u>	<u>539</u>

It should be noted that the 28 boys in the 5th Class were boys who had been admitted during the months of October, November, and December, 1892.

The following table shows the result of the Swimming Competition which took place in June, 1892 :—

No. on Ship's Books.	NAME.	No. on Watch Bill.	UNION OR PARISH.	Lengths	DISTANCE.	DESTINATION.
3542	W. Skinner	142	Kensington	262	5240 yds. = $2\frac{3}{4}$ miles and 400 yds.	Still on board.
4186	E. Saunders	443	Chelsea	242	5040 " = $2\frac{3}{4}$ " " 200 "	M. Marine.
4258	H. Packer...	159	Paddington	250	5000 " = $2\frac{3}{4}$ " " 160 "	M. Marine.
4866	C. Ross	177	St. Marylebone	236	4720 " = $2\frac{1}{2}$ " " 320 "	Still on board.
4525	E. Jupp	588	St. Pancras	218	4360 " = $2\frac{1}{4}$ " " 400 "	Royal Navy.
4433	M. Driscoll	392	Bloomsbury	201	4020 " = $2\frac{1}{4}$ " " 60 "	M. Marine.
4219	R. Dutton...	35	Greenwich	171	3420 " = $1\frac{3}{4}$ " " 340 "	M. Marine.
4078	R. Dansee...	233	Camberwell	165	3300 " = $1\frac{3}{4}$ " " 220 "	Royal Navy.
4194	J. Lloyd	192	Greenwich	162	3240 " = $1\frac{3}{4}$ " " 160 "	Still on board.
4495	P. Bariy	485	"	138	2760 " = $1\frac{1}{2}$ " " 120 "	Still on board.
4121	F. Skinner	381	St. Pancras	128	2560 " = $1\frac{1}{4}$ " " 360 "	M. Marine.
3956	A. Chamberlain	204	Wandsworth	98	1960 " = 1 " " 200 "	M. Marine.

The Winner of the 1st Prize was in the water 2 hours 40 minutes.

The following is a list of the Prizes allowed for swimming:—

W. Skinner	1st Prize,	Silver Watch,	allowed by the Ship Committee.
E. Saunders	2nd ,,	Silver Medal,	presented by Mr. Taylor.
H. Packer	3rd ,,	15s. 0d.	} Allowed by the Committee.
C. Ross	...	...	4th ,,	10s. 0d.
E. Jupp	...	...	5th ,,	7s. 6d.
M. Driscoll	...	...	6th ,,	5s. 0d.
R. Dutton	...	...	7th ,,	2s. 6d.

SCHOOL.

In his last annual School Report, H.M. Inspector, William Holgate, Esq., spoke of “the tone and order of the boys” as being excellent; at the same time he recognised the difficulties under which we labour in producing our results.

Two of the assistant schoolmasters, Mr. Scott and Mr. Caines, having obtained higher appointments, their places have been filled by Mr. H. T. Jones and Mr. E. Jones respectively.

The result of the Committee’s investigation into the whole question of the remuneration of the officers resulted in the adoption by the Managers of a revised scale of pay, which improved the position of the Assistant Teachers.

The School Committee have introduced a revised Syllabus of Religious Instruction; included the subject of “Drawing” in the usual school routine,* and adopted a new Geographical Reader throughout the school.

In connection with the subject of “Reading,” I may mention that, to encourage the boys to take more interest in this important branch of study, we have arranged a reading and writing room for them by screening off a portion of the main deck. A schoolmaster is always in charge to render the boys every assistance.

Each teacher is responsible for the singing of his own class.

Unabated interest in the occasional Magic Lantern Lectures given by the Head Schoolmaster is shown by the whole ship’s company; and every opportunity is taken advantage of to raise the intelligence of the boys, to interest them in their work, and stimulate their exertions.

MUSIC.

Twelve band boys have been discharged to the Royal Navy and 66 to the Army during the year 1892, the latter being found, from various causes, to be unfit for sea service.

The band adds greatly to the brightness and cheerfulness of the ship’s company, especially on Wednesday and Saturday evenings, when some very good dancing can be seen.

* The examination in this subject on the 7th February, 1893, by the Science and Art Department produced the “Excellent” award.

CARPENTERING.

I must again call your attention to the steady wear of the decks of the ship, particularly the upper decks. They are very thin, and, in spite of caulking, are leaky. The sides of the ship were well and properly caulked during the months of August and September, and will now last tight probably for some four or five years. Graven pieces were put in wherever the wood was found to be rotten.

The ship's boats are in constant use, and have been so during the last 17 years. They were old ones when supplied to the ship, and are constantly requiring repairs, which they receive at the hands of the two carpenters and the occasional assistance of a hired man. These men have more to do in patching bad places, repairing boats, and keeping pumps in order than they can well manage.

There are always a certain number of (passed out of school) boys employed in the Carpenters' Shop, who assist generally, especially in painting the boats after repairs.

TAILORING.

Each new boy is placed in the Tailors' Shop until he has obtained a certificate that he can use a needle properly and thoroughly repair old clothes, and, as a consequence, every boy in the ship can, and does, repair any garment of his kit. He is able also to make any alteration that may be necessary in any of his clothes, such as converting a nearly worn-out serge frock into a comparatively new jumper.

Work done in Tailors' Shop during the year 1892:—

375 Serge Frocks looped and buttoned.	5 Pilot Jackets repaired.
415 Gold Chevrons made.	8 Shoulder Belts made for Quartermasters and Signal Boys.
12 Masthead Pennants made.	3 Harmonium Covers made.
60 Flags repaired.	3,550 Soap Bags made.
96 Flags made for use of boys in teaching Signalling.	120 Pairs of Trousers repaired.
12 Boxing Gloves repaired.	185 Serge Frocks Watch-striped.
30 Bags made for Draughts and Dominoes.	135 Seamanship Stripes made.
24 Haversacks repaired.	800 Eyelet Holes made in Towels.
125 Oilskins repaired.	35 Straw Hats ribboned.
137 Sou'westers repaired.	3 Boat Cloths made.

SHIPPING ESTABLISHMENT AT LIMEHOUSE.

The following table shows the number of boys shipped each year from the Home at Limehouse to the Mercantile Marine. This does not include boys who are assisted to get ships for a second, third, and sometimes a fourth voyage:—

YEAR.	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	TOTAL.
No. shipped	63	107	78	81	95	93	104	91	87	92	118	148	124	75	69	1,525

The Shipping Home is also a place of call for old boys to look up old chums, and get general news of merchant ships.

HEALTH.

The following table is supplied by the Medical Officer, and speaks for itself:—

DISEASES.	No. of Sick admitted into the Infirmary during 1892.	Percentage of Sick.	Deaths.
General Diseases—			
Febrile (chiefly Influenza)	170	21·01	
Constitutional	50	6·18	
Local—			1
Diseases of the Respiratory System	5	0·61	
" " Circulatory "	2	0·24	
" " Digestive "	75	9·27	
" " Nervous "	2	0·24	
" " Cutaneous "	15	1·85	
" " Eye 	14	1·73	
" " Ear 	10	1·23	
Accidental Injuries	103	12·73	
Total	446	55·09	1

During the year 1892 the number of boys on board the "Exmouth" was 809.

SPIRITUAL INSTRUCTION.

I have received the following letter from the recently-appointed Chaplain:—

Training Ship "Exmouth,"

Grays, Essex.

January, 1893.

DEAR SIR,

Although only recently appointed Chaplain, and unable to give a report of personal work for the whole year, yet I so frequently visited the ship, and assisted the late Chaplain (Canon Whittington) in the services and religious instruction on board, that I seem to know much of the boys, and am able to write in the highest terms of praise as to the excellent conduct, reverence, and interest which they always manifest in any service I have taken. I consider the general tone, attention, and heartiness with which all the boys join in the services as most encouraging, and this impression is strengthened day by day. In January, 1892, we had 113 candidates under instruction for the sacred rite of Confirmation, and on Friday, the 29th of same month, the Bishop of Colchester held the Confirmation on board, when 105 boys were presented, those belonging to the starboard watch by Canon Whittington, and those belonging to the port watch by myself. On Friday, the 5th of February, the whole 105 boys, accompanied by Mr. Hollamby and Mr. Scott,

attended All Saints' Church and made their First Communion; their reverence and devotion were most gratifying.

On 7th December, 1892, the Bishop of St. Albans also held a Confirmation on board, when 89 boys were presented by myself, and on the following Friday (December 9th), 88 of them attended at All Saints' Church to make their First Communion; their earnestness, attention, and reverence would compare favourably with many congregations composed of older people possessing greater advantages. I cannot close this my brief and first report without expressing to the schoolmasters and other officers, but especially to you, my most heartfelt thanks for your kind co-operation and interest in my part of the work, and for the many valuable suggestions and help which have been so readily and kindly given as regards the services and spiritual instruction.

I am, dear Sir,

Yours very faithfully,

(Signed) FREDRICK HASLOCK,

Chaplain of the Training Ship "Exmouth."

To CAPTAIN BOURCHIER, R.N.

GENERAL REMARKS.

I am pleased to report that the boys' conduct has been, with few exceptions, very satisfactory during the past year.

As we continue to find openings for our boys almost immediately on the completion of their training, it will be readily understood that our numbers still continue below our actual accommodation, although latterly there has been a marked improvement in this respect.

The Annual Inspection and Prize Day took place on the 2nd of July, when the prizes were kindly distributed by Sir Edwin H. Galsworthy, J.P., D.L., Chairman of the Board. (The prize list marked A is appended.) The boys acquitted themselves so well at their various drills that they won the admiration of the visitors, who intently watched their varied movements.

The prizes annually given for success in school work, and also for proficiency in the band, were kindly handed to the winners by your Chairman, Mr. Strong, on the 18th April, who, in the course of his remarks to the boys, spoke of the importance of their paying strict attention to all their duties on board, in order that they might be qualified to occupy good positions in the world.

Another pleasing duty devolved on Mr. Strong, some time later in the year, when he handed the six silver watches—presented annually by the

kindness of Mr. Halsey—to those boys whose good behaviour, attention to duty, and general ability had qualified them for this honour.

Owing to the continued generosity of those friends who have interested themselves in the Boys' General and Entertainment Fund, I have again had several opportunities of giving the boys some relaxation from their duties by engaging various gentlemen to provide them with a pleasant evening's amusement.

The list (B) of old boys who have either been seen or heard of is appended.

The ship naturally has an attraction for a good number of our old boys, who, regarding it as a home, generally pay us a visit at holiday times, or at the end of a voyage.

About 125 boys visited the Princess's Theatre on the 3rd March, by special invitation, to witness the production of a nautical play. It is needless to mention that they thoroughly enjoyed the treat, and on their return, in imagination replayed the piece for the benefit of their less fortunate shipmates.

There were also a selected few of the more expert hornpipe dancers, and those proficient in cutlass drill, invited to an Assault at Arms in London. Some 13 of them took part in this display, and were successful in contributing very greatly to the evening's amusement.

I would mention, in conclusion, that the credit of whatever success in the work done on board has been achieved is not due to myself alone; my efforts are greatly assisted, and my suggestions loyally worked out to a satisfactory conclusion, by the staff of officers you have placed under me, and to whom my best thanks are due.

Thanking you, gentlemen, for your confidence in my efforts, and for the liberality you have always shown me,

I beg to remain, Gentlemen,

Your obedient Servant,

(Signed) W. S. BOURCHIER,
Captain-Superintendent.

The Appendices A and B, above referred to, are not included in this volume.



A MAP OF
LONDON
SHOWING
THE SEVERAL SANITARY DISTRICTS
COMPILED BY
THE METROPOLITAN DISTRICT
1892

SCARLET FEVER
Cases notified under the provisions
of the Metropolitan Board of Health Act, 1873.
Cases of the Metropolis, London, 1892. **+** E. Hospital
Cases of the Metropolis, London, 1892. **+** W. Hospital



A MAP OF
LONDON
SHOWING
THE SEVERAL SANITARY DISTRICTS
CORRECTED BY
THE METROPOLITAN BOARD OF HEALTH
1892

The color shown SCARLET FEVER cases reported from the sanitary districts during the 3rd quarter of 1892.

Number of cases reported from each sanitary district. ■ E. Hospital
+ WEST WHARF



A MAP OF
LONDON
SHOWING
THE SEVERAL SANITARY DISTRICTS
CONTAINING
THE METROPOLITAN DISTRICT
1892

THE SCARLET FEVER
SCARLET FEVER

Legend:
E Hospital
+ WEST WHARF



HAMPSTEAD

SINGTON

HACKNEY

ST MARYLEBONE

SHOREDITCH

BETHNAL GREEN

PADDINGTON

CITY

MILE END

HAMMERSMITH

KENSINGTON

WESTMIN

STER

ST SAVIOUR'S

ST OLAVE

BERMONDSEY

ROTHERHITHE

SMITH

CHELSEA

NEWINGTON

GREENWICH

WOOLWICH

BATTERSEA

CAMBERWELL

PLUMSTEAD

WANDSWORTH

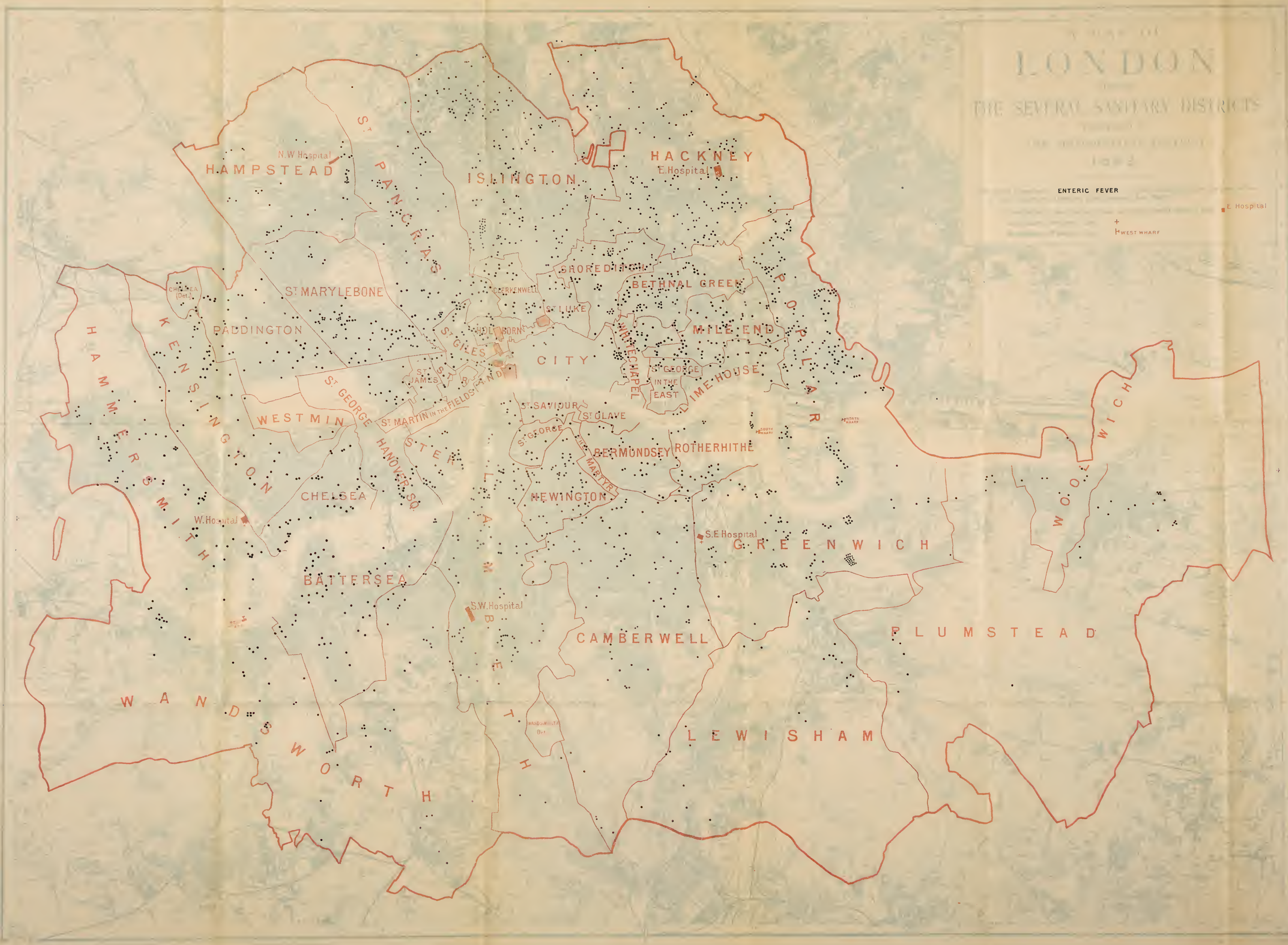
WORTH

LEWISHAM

MAP OF LONDON

THE SEVERAL SANITARY DISTRICTS
1892

ENTERIC FEVER
E Hospital
+ WEST WHARF



A MAP OF
LONDON
 SHOWING
 THE SEVERAL SANITARY DISTRICTS
 DIVIDED INTO
 THE METROPOLITAN DISTRICTS
 1852

TYPHUS FEVER and other fevers SMALL-POX
 Cases notified under the provisions of the Sanitary Districts Act, 1852
 Townships of the Metropolitan Sanitary Board shown in blue
 Areas not notified. One +
 Areas not notified. Two + WEST WHARF
 E. Hospital





E

